

*The*

# CHEMIST AND DRUGGIST



For Retailer, Wholesaler and Manufacturer

SEPTEMBER 27 1958

## Which single Barrier Cream

lets her  
do dry  
grimy jobs  
like this



...and  
wet messy  
jobs  
like this



...yet keeps  
her hands  
looking  
like this



...and sends  
her back for  
repeat sales  
like this?



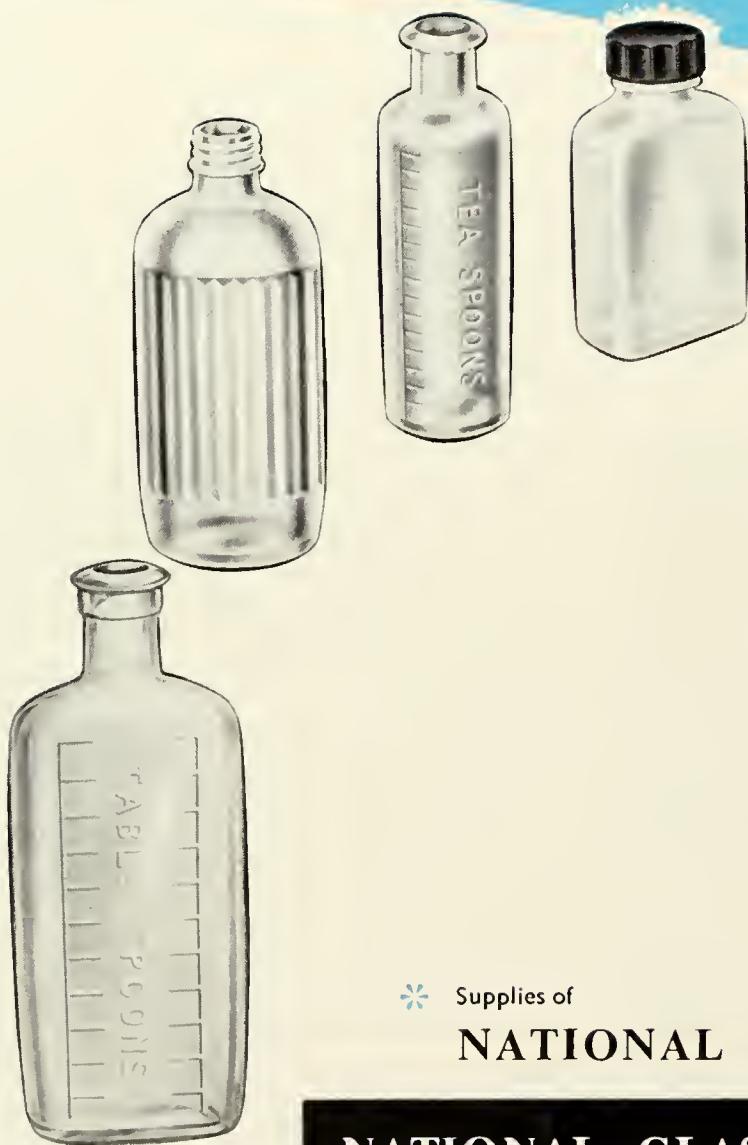
Yes, of course—

**Savlon 2-PURPOSE BARRIER CREAM**

Increased Press Advertising support this year!



**NOW** is the time to check  
your stocks of Glass Containers  
for the winter months



**Dispensing Bottles**  
*1-oz. to 20-oz.*

**Ribbed Ovals**  
*½-oz. to 16-oz.*

**Plain Ovals**  
*4-oz., 8-oz. and 16-oz.*

**Bow-Front Panels**  
*1-oz. to 8-oz. and 16-oz.*

**Olive Oil Bottles**  
*2½-oz., 5-oz. and 10-oz.*

**Oval Tablet Bottles**  
*Nos. 1 to 7½ sizes.*

**Rectangular Tablet Bottles**  
*Nos. 1, 2, 3, 4, 5 and 6 sizes.*

**Round Screw Jars**  
*Tall and Semi-squat.*

**Panel Flats**  
*1-oz. to 4-oz.*

**Vials**  
*½-oz. to 3-oz.*

Available in White Flint Glass only.  
*Wholesale only.*

\* Supplies of

## NATIONAL GLASS CONTAINERS

are available to replenish  
your stocks for the winter

### NATIONAL GLASS WORKS (YORK) LTD.

FISHERGATE, YORK. Tel. YORK 23021  
ALSO AT: 105 HATTON GARDEN, LONDON, E.C.I.  
Tel. HOLBORN 2146

TRADE  MARK

\* Packed in easily handled cartons.

*Even hot cakes  
need selling...*



**so make sure your lines are advertised  
in the Daily Mail**

The best line of merchandise in the world won't sell itself. So when the salesman calls, you'd better find out if it's properly advertised. Ask him this: "*Is the Daily Mail on the advertising schedule?*"

So much depends on the answer. If it's "Yes", you can stock up and be sure you're not making a mistake. You can't go wrong because your best customers, the ones who come back day after day, tend to be Daily Mail readers. You can tell from their shopping habits.

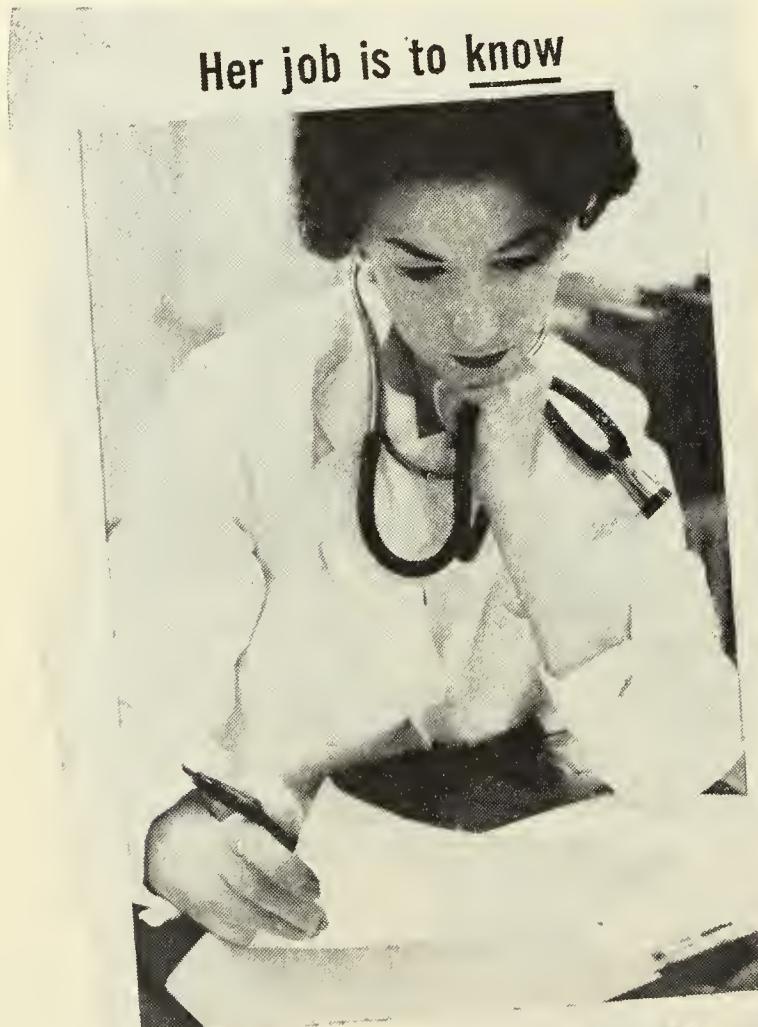
People know from experience that Daily Mail advertisements are as good as their word. All Daily Mail advertisements are carefully vetted. If a reader finds an advertised product unsatisfactory — and makes a genuine complaint — the Daily Mail will see that he gets his money back. If necessary it will bear the expense itself. People know they can trust the Daily Mail.

So it's only sensible to check. Make sure your lines are advertised in the Daily Mail.

**YOUR BEST CUSTOMERS READ THE DAILY MAIL**

# VIGOROUS NEW ADVERTISING FOR DISPRIN

*...and 9 out of 10 people  
will see it more than 30 times!*



She prefers **DISPRIN**  
REGD.  
for the relief of pain

PEOPLE EXPERIENCED in these things know that  
Disprin is quick-acting and effective. But there is  
knowledge of the gastric irritation

## MEDICAL APPROVAL MAKES A STRONG SALES STORY

This compelling new advertising for Disprin will reach *nearly 90% of all adults in Great Britain* in 1958. This advertising keeps up the pressure, too—typical readers will see it more than 30 times during the year.

Large advertisements in national daily and Sunday papers, women's magazines, will all be telling the Disprin story—the *soluble, safe* pain-reliever that doctors recommend.

**RETAIL PRICES**    50-tablet bottle 3/3  
(*incl. P.T.*)            26-tablet bottle 1/1½  
                              8-tablet foil 9d.

**TRADE PRICES**    50-tablet bottle 23/- doz.  
(*excl. P.T.*)            26-tablet bottle 13/10 doz.  
                              8-tablet foil 5/2 doz.

RECKITT & SONS LTD., PHARMACEUTICAL DEPT., HULL

**Stock and display DISPRIN, and make the  
most of this strong advertising support**

# Important Announcement

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On and after October 1st, 1958, Merrell-National (Laboratories) Ltd., will become the sole distributor in the United Kingdom of its ethical products of original research, Tace, Kolantyl, Merbentyl, Debendox, Frenquel and Meratran.

In the past these products have been promoted and distributed by Riker Laboratories Limited, Loughborough, Leics. Now, a significant increase in the number of new products coming from Riker Laboratories Limited and a coincident increase in those developed by Wm. S. Merrell Company, Cincinnati, Ohio, and its associated company, The National Drug Company, Philadelphia, Pennsylvania, have necessitated the step noted above. Both companies feel that this new arrangement will result in even better service to the pharmaceutical and medical professions.

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*In this joint announcement we at Riker are happy to welcome Merrell-National (Laboratories) Ltd.—competitors though they be. Our relationship with the parent companies has always been most cordial, and we look forward to its continuation with the British company in the years ahead.*

RIKER LABORATORIES LIMITED, LOUGHBOROUGH, LEICS.

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*For our part we at Merrell-National (Laboratories) Ltd. extend our sincere thanks to Riker for their successful promotion and distribution of our products in the past. We shall strive to maintain the high standard they have established. Above all, we appreciate the many courtesies and gestures of friendliness that are easing the difficult task of taking over.*

MERRELL-NATIONAL (LABORATORIES) LTD., LONDON, W.I

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**From October 1st all trade communications concerning Tace, Kolantyl, Merbentyl, Debendox, Frenquel and Meratran should be addressed to**



**MERRELL-NATIONAL (Laboratories) Ltd.,  
20 Savile Row, London, W.1.**

Tace the unique fat-stored oestrogen  
Merbentyl relieves gastrointestinal spasm without dry mouth or blurred vision  
Meratran overcomes emotional fatigue safely without side effects

Kolantyl 4 healing actions in peptic ulcer  
Debendox controls morning sickness from the very first day  
Frenquel relieves hallucinations and delusions

TRADEMARKS: TACE, KOLANTYL, MERBENTYL, DEBENDOX, FRENQUEL, MERATRAN

*Nature's Remedy for Coughs and Colds*

## LOUGHREY'S SYRUP OF IRISH MOSS



Soothes and gives  
IMMEDIATE RELIEF

1/9 size 12/- per doz.)	Plus Tax
3/- size 20/- per doz.	
1/- Pastilles 8/- per doz.)	

### SPECIAL BONUS OFFER

14 to dozen on 3 dozen lots or over on all orders on or before 31st October, 1958. Hand-picked Carrageen Moss Loughrey Brand 1/4 size @ 12/- per doz. TAX FREE. CARRIAGE PAID.

IRISH MOSS MANUFACTURING CO. LTD.  
421 ANTRIM ROAD, BELFAST. Telephone: 77838

Win the lasting gratitude of  
your coughing, sneezing  
customers by recommending

## BESORBON

REGD. TRADE MARK

### MEDICINAL SNUFF

the proved remedy

Your wholesaler  
can supply you promptly.

Orders of one dozen come in  
attractive counter display box for

### MORE SALES—MORE PROFIT

Kemsales Ltd., 20 Eastcheap, London, E.C.3

*Announcing*

**Alfonal**  
Regd.  
PRODUCTS

A New  
Corn Oil  
Vegetable Fat  
Milk

Send coupon for full  
details.

Manufactured by ALFONAL LIMITED  
SHELL-MEX HOUSE, STRAND, LONDON, W.C.2

Alfonal corn oil Vegetable Fat milk is a suitable alternative to animal fat milk and recommended for thrombosis and atheroma sufferers.

G.P.s are prescribing this vegetable fat Milk to their patients. Hospitals are adding it to their diet charts. Sure to sell on display.

Alfonal Milk is supplied in handy size Tins containing 15 fl. oz. Price 1/- per tin retail, 9½d. wholesale.

It is homogenised for ease of digestion and sterilised for long-keeping quality.

Unopened, Alfonal will keep fresh indefinitely.

To Alfonal Limited  
Please send Literature to:

Name .....  
Address .....

G.F.C.10

SURE-SELLING STOCK!  
OVER 150 YEARS REPUTATION

## KEARSLEY'S

THE ORIGINAL

### WIDOW WELCH'S PILLS

Over 1/9 BOX PROFIT by ordering  
1 dozen 6/5 size. Bonus given on every  
dozen (13). It pays to push this size.

C. & G. KEARSLEY LTD.  
71 DARTMOUTH ROAD, LONDON, S.E.23

Established 1787 in the Reign of King George III

**NEW** TO GREAT BRITAIN

### Nicobrevin

#### ANTI SMOKING CAPSULES

HARMLESS—TASTELESS—EFFECTIVE  
RETAIL PRICE 21/- per tin of 50 capsules  
TRADE PRICE 11/8d plus P.T. 3/6d

Literature & display material on request

ASK YOUR WHOLESALER  
or write MILLER OF GOLDEN SQ., LTD.  
13 GOLDEN SQ. LONDON WI Telephone GERrard 6533

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(continued overleaf)

## Whitecross



**ADD PLEASURE TO YOUR LEISURE**

Packed in attractive Display Carton containing:—

- 4 Pieces No: 951 in assorted colours
- 2 Pieces No: 281 in shell

Price to Public **17/6** per pair



To promote the sale of these new TELEVISION GLASSES, the WHITECROSS Optical Company are launching an extensive

### ADVERTISING CAMPAIGN

incl. TELEVISION starting Sunday Evening, October 12

OBTAI N YOUR SUPPLIES NOW FROM YOUR USUAL WHOLESALER

Sole Importers for the United Kingdom:—



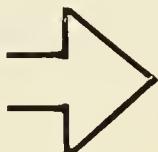
Whitecross

Optical Company

(Proprietors, Fredk. Lehmann Co. Ltd.)  
Frederick Works, Rochester Place, London N.W.1  
Telephone: GULLiver 6731-2-3

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**Thovaline****the answer to**

- **bedsores**
- **burns**
- **urine dermatitis**

**BEDSORES** can be prevented by applying THOVALINE before the trouble starts but if already in existence will help greatly in the healing.

**URINE DERMATITIS.** Excellent healing properties where rash exists and will prevent such trouble occurring if applied beforehand. Offensive odour is eliminated.

**BURNS.** Unique action. THOVALINE is self sterile, it eliminates pain and is a rapid healer.

*Particulars from your usual wholesale house:*

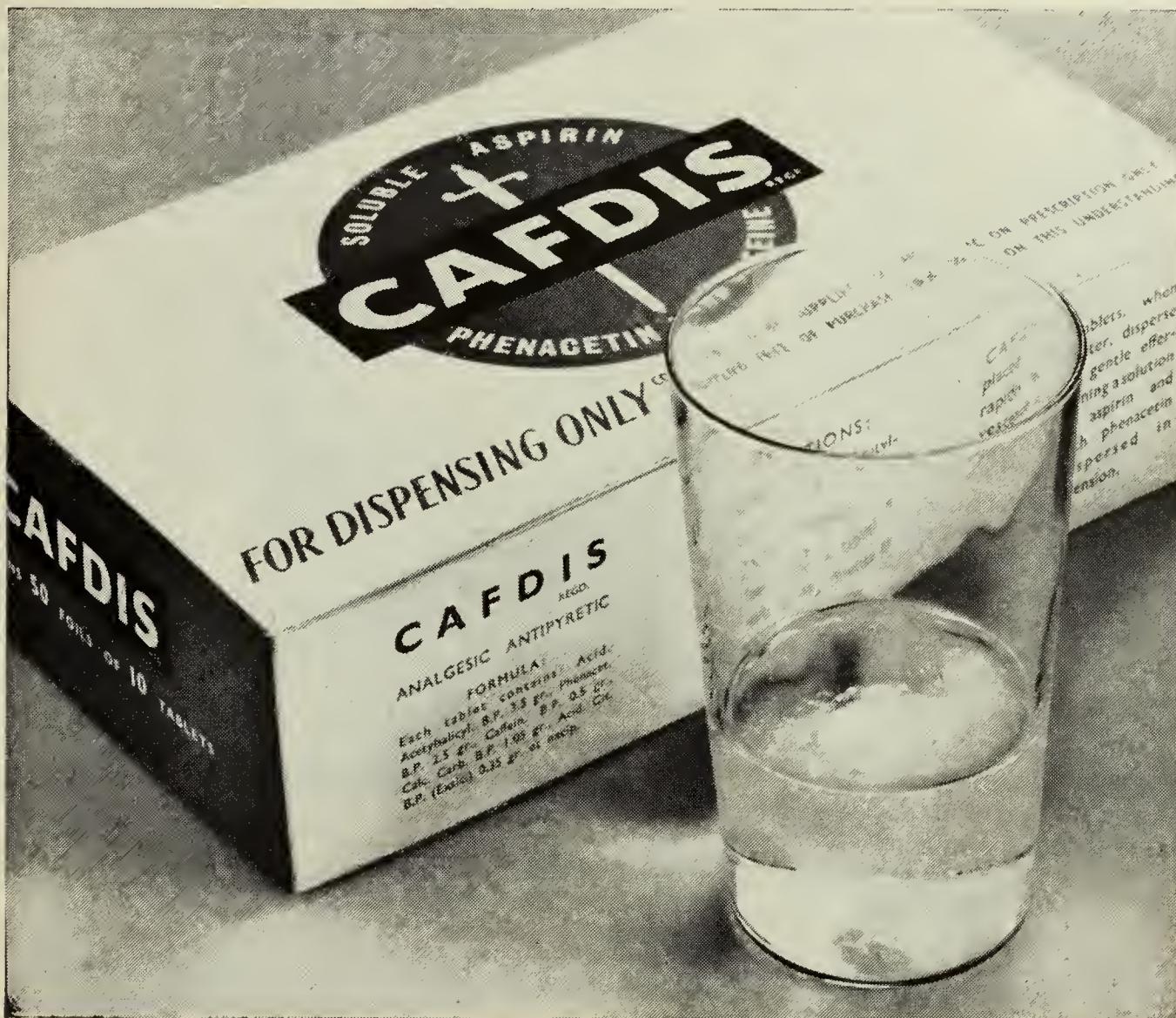
**ILON LABORATORIES**

**LORNE STREET · HAMILTON · LANARKSHIRE**

Tel: HAMILTON 410

# **NEW: CAFDIS**

REGD.



# **Soluble aspirin— phenacetin — caffeine**

The aspirin in Cafdis is solubilised in the same way as in Codis and Solprin. In water, the phenacetin is in fine suspension while the aspirin and caffeine go into solution. This means that there is far less risk of gastric irritation with Cafdis than with other APCs.

Also, because it is substantially soluble, Cafdis is easily and pleasantly taken. It is absorbed quickly, and rapidly becomes effective.

Each tablet contains: Acid. Acetysalicyl. B.P. 3.5 gr., Phenacet. B.P. 2.5 gr., Caffein. B.P. 0.5 gr., Calc. Carb. B.P. 1.05 gr., Acid. Cit. B.P. (Exsic.) 0.35 gr., et excip.

Have adequate stocks of Cafdis in hand. Doctors will be quick to recognise its unique advantages. Cafdis is not advertised to the public. N.H.S. basic price—500 tablets in foils of 10 tablets each—16/- per box.

**RECKITT & SONS LTD., HULL**



**The New  
Dr. Scholl's  
Display Stand**

sent with your stock of foot aids, takes up little more than 2 square feet on your Pharmacy floor. And how it pays for its space . . . again and again!

An outlay of only £14, for example, yields up to £8.8.0 profit . . . profit that will recur the whole year through on these fast selling, nationally advertised lines.

**A  
Permanent  
Foot Comfort  
Display  
in your  
Pharmacy  
brings you valuable,  
additional turnover  
Every Day**

9 out of every 10 of your customers suffer from some form of painful foot trouble. A foot comfort section in your Pharmacy multiplies your sales of Dr. Scholl's Foot Aids. This modern, compact Display Stand sells foot aids the modern way — lets your customers select their own foot comfort needs, saves assistants' time, brings increased sales . . . every day.

Effortlessly, too, it increases profits. Write to us for details TO-DAY.

# **FEATURE FOOT COMFORT**

THE SCHOLL MFG. CO., 182-204 ST. JOHN STREET, E.C.1



**"SKYLON" POLYTHENE  
HOT WATER BOTTLES**

A P.A.T.A. LINE



Illustration above shows the range of colours in which the new "SKYLON" polythene hot water bottles are being made. Light in weight, no parts to perish—a line specially produced for Chemists sales only.



**"SKYLON COMFORT"**

Packed in polythene bags with attractive "Sales-Appeal" design showing, in silhouette, a Teenager in shortie and alternatively, Father in his nightshirt and cap, they are, with their bright colours a sure selling line for young and old. Ask your Wholesaler to show you the bottles in their printed wrapper and stock up for Winter and Christmas Sales now!

*Please show this advertisement to your assistants*

You'll be thrilled too,  
Miss Chemist  
—with Goya  
Beauty Plus\*

\* The new all-in-one beauty cream in a plus-size tube

Nobody is in a better position to know than you, Miss Chemist, why new Goya Beauty Plus is the most exciting cream for years! Isn't it a marvellous idea? One cream to do the work of many creams. One complete beauty cream in a whopping big tube. The cream that every woman (you included) needs for her skin-care routine.\* A joy of a cream to sell. One you can easily persuade your customers to try. Because new Beauty Plus is so kind and so pure you can recommend it for any type of skin—oily, medium or dry.

\*The Beauty Plus formula was arrived at only after Goya had questioned thousands of women on their skin-care needs.

**AS A NOURISHING CREAM,**  
Beauty Plus is wonderfully effective. Tell your customers to leave it on overnight to erase tiny lines, to keep the skin moist and firm.

**AS A CLEANSING CREAM,**  
Beauty Plus is wonderfully effective. Tell your customers to use it night and morning—for a spotlessly clean skin, a clearer, fresher look.

**AS A SOOTHING CREAM,**  
Beauty Plus is wonderfully effective. Tell your customers to apply it generously on chapped hands and lips, to use it for all skin care.

Beauty Plus is being launched this month, in a nation-wide campaign. Every major women's magazine will be carrying an advertisement to help you sell the new Goya beauty cream!

First it was perfume—  
now it's cosmetics as well—  
there's the magic of success  
about the name **Goya**

*and now—*  
**METAL BOX  
OFFERS**



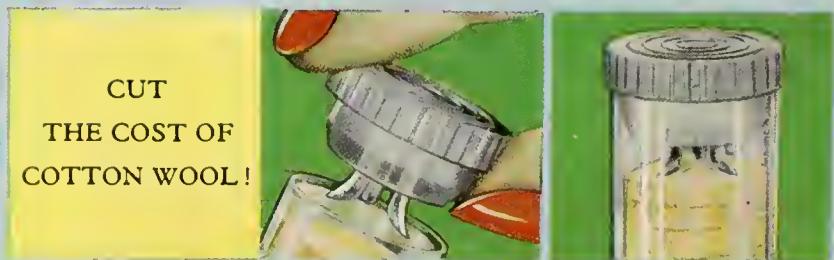
# printed

## POLYSTYRENE TUBES

The colour printed polystyrene tube is the latest aid to the sale of tablets. Direct printing in two colours on the surface of the tube replaces labelling entirely, and the tube presents an extra smart and attractive appearance on the sales counter. Polystyrene tubes are tough and light. Each is effectively sealed by a one-piece polythene stopper, easy to remove and easy to replace. For additional sales-appeal a wide range of coloured stoppers is available. Please ask today for samples and further details.



Pack your products in containers that will not be left on the bathroom shelf! Metal Box polystyrene tubes are attractive and specially designed to be carried in the pocket or handbag.



*The Pillar Pack Stopper with the flexible prongs holds tablets gently in place, keeping them undamaged. No cotton wool is needed, no labour to insert it. The tube looks neat,*

*clean and efficient. Pillar Pack Stoppers can be supplied with the  $\frac{1}{8}'' \times 2\frac{1}{2}''$  tube, and are used by ICI for the Savlon pack featured in the main illustration.*

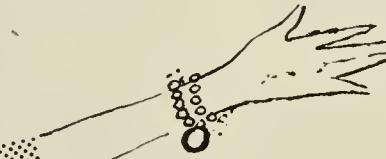


**THE METAL BOX COMPANY LIMITED**

Plastics Group • 37 BAKER STREET • LONDON • W.1 • Hunter 5577

# JUNE perfume by Saville

TO BE PROMOTED TO THE  
**YOUNGER MARKET**  
 FROM NOW UNTIL CHRISTMAS



## LARGE SPACE ADVERTISING

will sell JUNE perfume to young women everywhere in the magazines they READ!

SINCERELY, PICTUREGOER, TRUE ROMANCES, TRUE STORY, SHE, WOMAN'S DAY, MODERN WOMAN, PHOTOPLAY, WOMAN'S STORY, AND WOMAN.

**THIS IS THE ADVERTISEMENT  
*that 4 million girls will see!***



## DISPLAY AND SELL!

June perfume displays well. Pretty pale green packs for perfume, top-to-toe, talc, handcream, perfume sticks and exquisite coffrets for Christmas sales (no box charge) — plan your display of JUNE — take advantage of the promotion and sell!

See our representative — write to us today

make sure you stock MORE June for the demand that's coming SOON!

\* Send today for the Saville price list and catalogue — choose your fast-selling lines.

**JUNE**

by **Saville**

SAVILLE 16 SACKVILLE STREET PICCADILLY LONDON W.1



**JUNE by Saville**



4/- TO £3.7.6

A complete perfume wardrobe in June — Top-to-toe, handcream, talc, toilet soap, bathcubes and perfume stick.

MISCHIEF · CLIQUE · TUTU  
 JUNE · SEVENTH HEAVEN  
 ORANGE BLOSSOM

SAVILLE 16 SACKVILLE STREET PICCADILLY LONDON

# For your CHRISTMAS TRADE



order  
NOW these  
*Swan* **BATH**  
and **NAIL**  
**BRUSHES**

A campaign of  
**CONSUMER ADVERTISING**  
has been booked in  
**LEADING PERIODICALS**

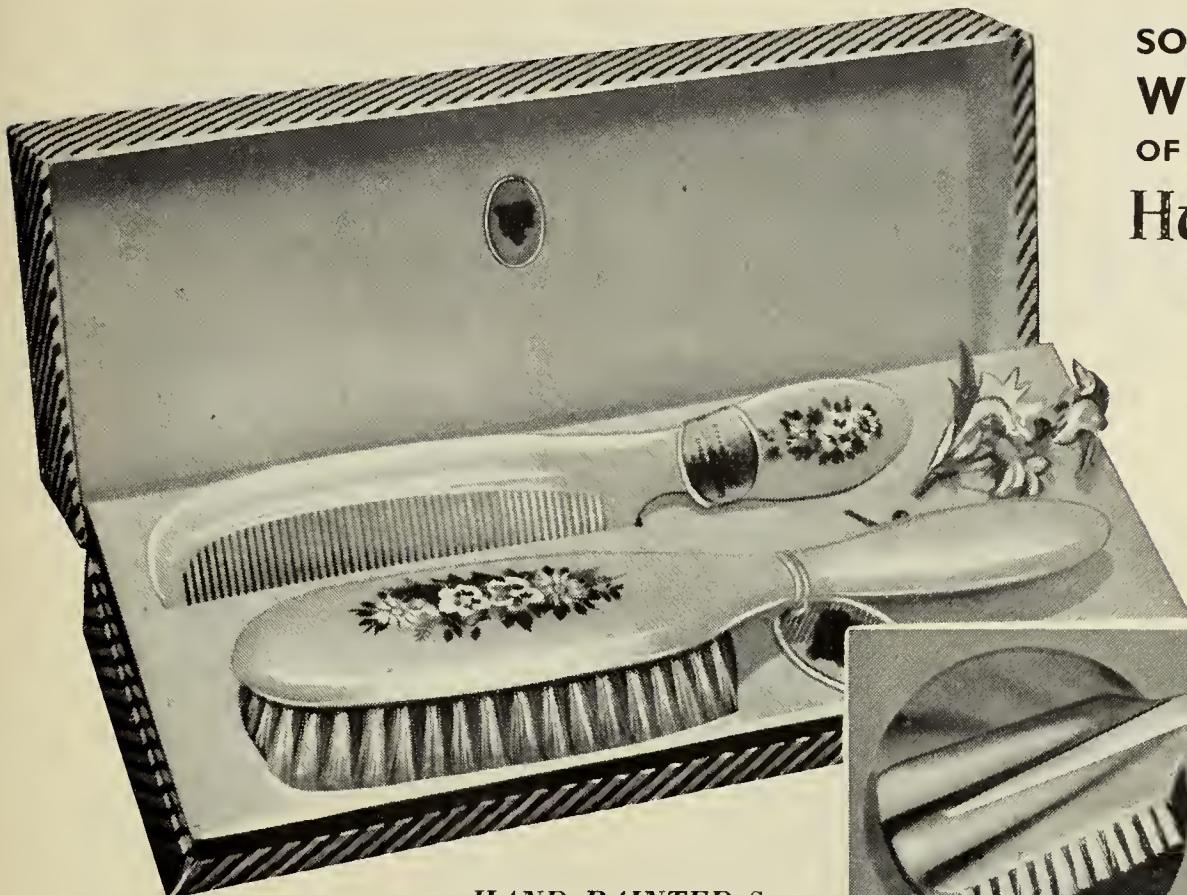
with  
millions of  
gift-buying  
readers

Over TWO MILLION of the famous DOLPHIN series have been sold. These new SWAN Bath and Nail brushes are packed in attractive counter display gift caskets. They are available in the same range of pastel and contemporary colours as the DOLPHINS. The DOLPHIN Bath Brush, Nail Brush and Bath Sponge are also available as heretofore.

SWAN BATH BRUSH sells at 12/6

SWAN NAIL BRUSH sells at 5/-

BATH & NAIL Set sells at 17/-

**HAND-PAINTED Sets**

IN TWO DELICATELY COLOURED FLORAL DESIGNS

- (1) Roses and Daffodils
- (2) Pansies and Daisies

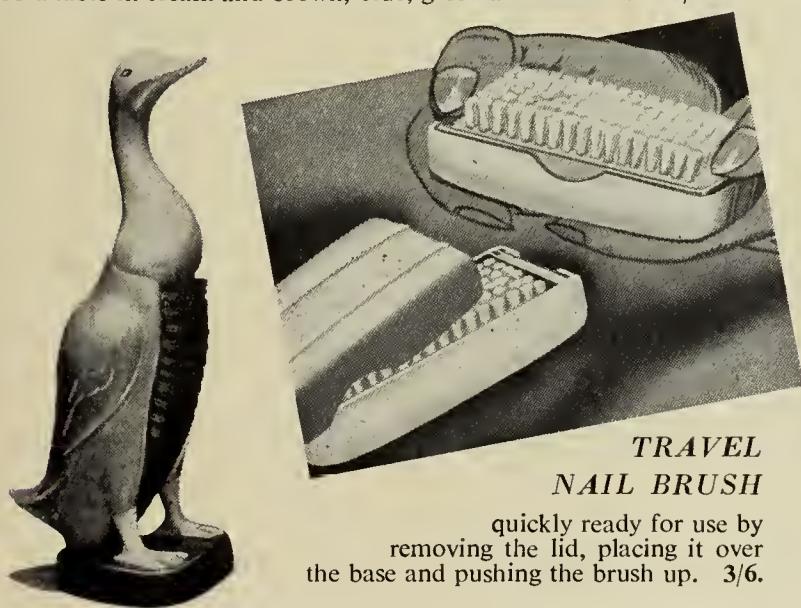
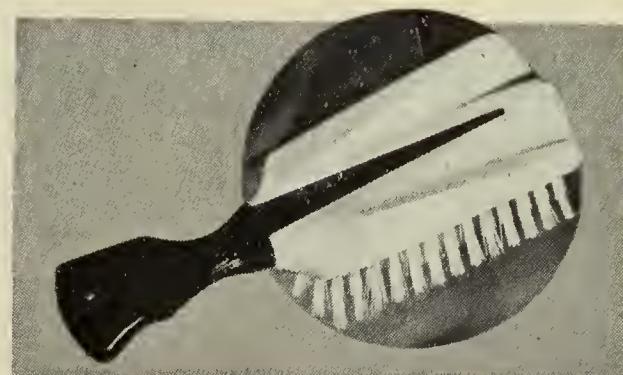
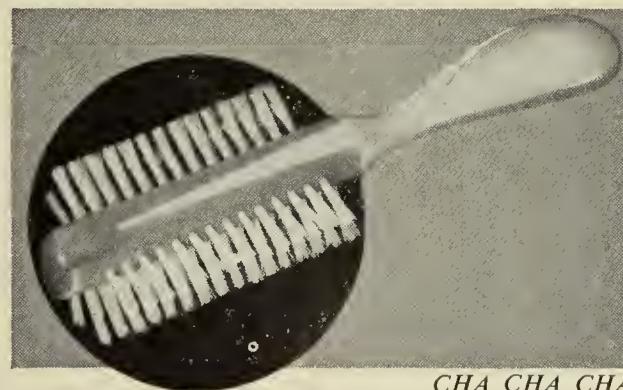
individually hand-painted on pearlescent handles. In counter display caskets.

2-piece Brush-and-Comb Set to retail at ..... 21/-  
3-piece Brush, Comb-and-Mirror Set to retail at ..... 32/-**BROSSES PARISIENNES**

an attractive range of duo-tone brushes imported from France. These have contrasting colours for head and handle. Individually packed. A wide range, of which the most popular are CANASTA, OLYMPIC and CHA CHA CHA (illustrated).

**DANDY DUCK CLOTHES BRUSH**

This has proved itself as an all the year round best seller. It makes a welcome addition to any home and an excellent Christmas gift. Available in cream and brown, blue, green and maroon. 27/6.

**TRAVEL  
NAIL BRUSH**quickly ready for use by  
removing the lid, placing it over  
the base and pushing the brush up. 3/6.**CANASTA****OLYMPIC****CHA CHA CHA**

**SOME OF THE  
WIDE RANGE  
OF  
Hughes  
LINES**

*The  
following  
are the  
**MOST  
POPULAR  
SELLERS***

**Hughes Brushes** LIMITED

32 AJAX AVENUE • SLOUGH • BUCKS

# ANNOUNCING BIOMYDRIN

the  
complete  
nasal spray



BIOMYDRIN is a new comprehensive nasal spray by William R. Warner & Co. Ltd. and will be released on 1st October 1958. BIOMYDRIN has a decongestant, antibiotic and antihistaminic action.

Doctors are being told about BIOMYDRIN in the medical press, by mail and by representatives.

BIOMYDRIN is available from all wholesalers, or direct from William R. Warner.

#### ORDER YOUR BIOMYDRIN NOW

Available in plastic atomizers containing  $\frac{1}{2}$  fl. oz.  
at a trade price of 42/6 per dozen, exempt P.T.

## Biomydrin

Trade Mark



WARNER

WILLIAM R. WARNER & CO. LTD., EASTLEIGH, HAMPSHIRE.

RIO 323/4

HIGHEST TOLERATION  
PRACTICAL  
DOSAGE COMBINATIONS  
SATISFACTORY  
CLINICAL RESPONSE

*Physicians therefore specify*

# Calcium B-PAS WANDER

*and*

# B-Pasinah WANDER

(calcium B-PAS Wander plus isoniazid)

*in the domiciliary  
Chemotherapy of Tuberculosis*

**B-PAS (Wander)**, 4-benzoylamino-2-hydroxybenzoic acid, first introduced by our Research Laboratories in 1948, is the drug of choice in regimens comprising PAS in concurrent therapy.

In the form of its calcium salt, it induces only minimal side-effects as compared with sodium PAS, and because of its high acceptability guarantees as far as possible that domiciliary patients take their medication.

### CALCIUM B-PAS (Wander)

Powders: Tins of 150 and 400 x 3.5g. envelopes  
Cachets: „ „ 80 and 400 x 1.0g.

Also available: Sodium B-PAS (Wander)  
in 1.5g. Cachets.



### ‘B-PASINAH’ (B-PAS plus Isoniazid)

Powders: Calcium B-PAS (Wander) 3.5g.  
Isoniazid ... ... ... 87.5mg.

Tins of 150 and 400

Cachets: Calcium B-PAS (Wander) 1g.  
Isoniazid ... ... ... 25mg.  
Tins of 100 and 500

Price details of all forms of PAS from the Medical Dept.



*All Wander tuberculostatic products are available from usual wholesalers or direct from*

**A. WANDER LIMITED, 42 UPPER GROSVENOR ST., GROSVENOR SQ., LONDON W.1**



Inecto are launching a lively new advertising campaign to stimulate the demand for 'Hair Magic'. Young women will want the fashion colours. Older women can cover up to 50% of grey with the Progressive Browns, to put the clock back five - ten - fifteen years.

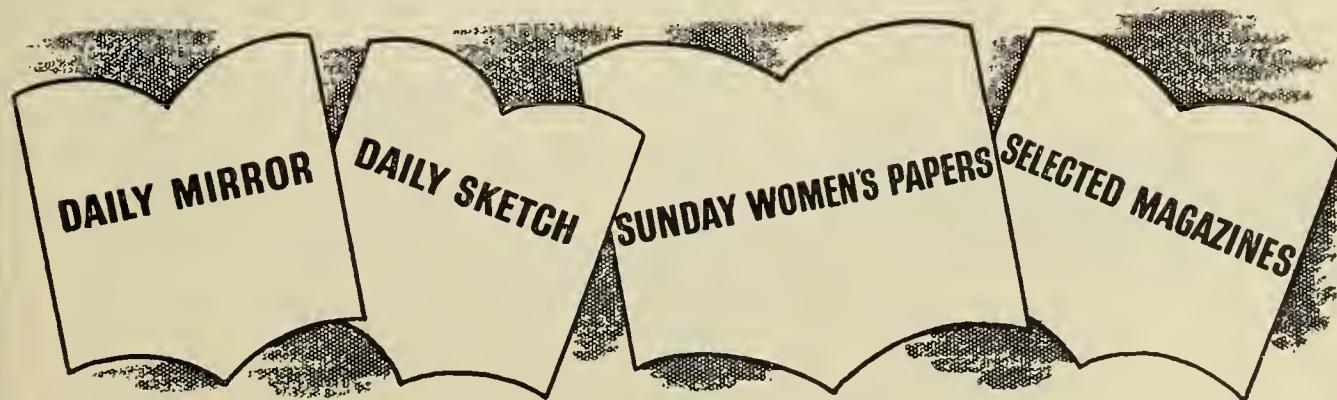
**DO BETTER BUSINESS**

*with MAGIC ★ ★ ★*

# Hair Magic!

THE GLAMOROUS SEMI-PERMANENT  
COLORING THAT SHAMPOOS COLOR INTO THE HAIR

**NOW** — the first campaign goes into action  
in the mass-readership newspapers



WITH BIG, BRIGHT NEW ADVERTISEMENTS TO START THE BOOM

**IN JANUARY** a bigger campaign will follow up with  
half-pages in full colour in such weekly magazines as  
“Woman” and “Woman’s Own”, and with further insertions in the glossies.

- Make sure you know about Hair Magic. How simple and easy it is to apply at home, be able to advise your customers about the shades. Ask for full details, leaflets, display material.

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**WHITE FLINT or AMBER**

- ★ Distinctive **SQUARE** Shape.
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- ★ Full-automatic production.
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3dr  $\frac{1}{2}$   $\frac{3}{4}$  1  $1\frac{1}{2}$   $1\frac{3}{4}$  2 3  $3\frac{1}{2}$  oz.

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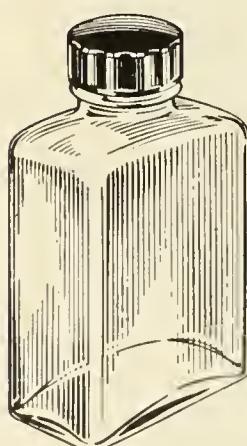
**Suggested Packs—**

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- 1-oz.— 50 Aspirin or  
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- $1\frac{3}{4}$ -oz.—100 Aspirin or  
50 Codeine.
- $3\frac{1}{2}$ -oz.—100 Codeine.

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**RANGE**

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*because*

- The quality is sound, reliable and backed by the Dunlop reputation
- The range is tailored to fit all requirements
- There's always something new and attractive—this time the Quiltie
- They're supported by a National advertising campaign in the Sunday papers and by a series of advertisements on Commercial Television
- The name of Dunlop has prestige and integrity . . . inspires confidence

**stock up NOW-with DUNLOP**

*all Dunlop hot water bottles carry the Good Housekeeping Seal*



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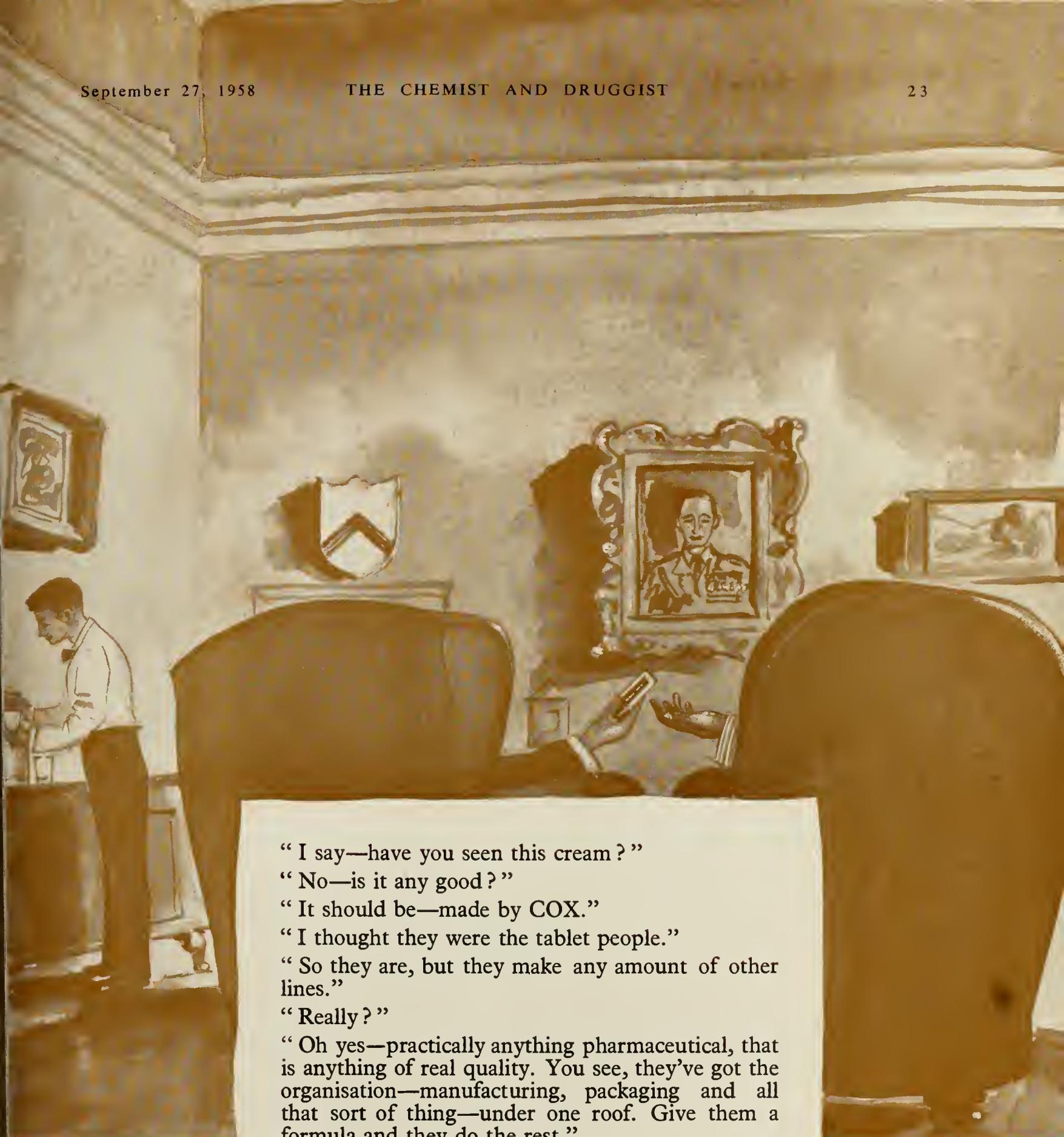
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"I say—have you seen this cream?"  
 "No—is it any good?"  
 "It should be—made by COX."  
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 "So they are, but they make any amount of other lines."  
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 "Oh yes—practically anything pharmaceutical, that is anything of real quality. You see, they've got the organisation—manufacturing, packaging and all that sort of thing—under one roof. Give them a formula and they do the rest."  
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BRIGHTON, ENGLAND**



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**POP-UP**  
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**TRIMMER**

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More than a million large advertisements in the nation's leading papers and magazines will punch home the story of the Pifco Prince. A powerful, persistent advertising campaign will bring customers to you to see and buy the most advanced electric Shaver. Be sure you have on show the new gaily-coloured, cleverly designed displays and showcards which are yours for the asking.

Ask your wholesaler for supplies of the intriguing new leaflets. Be ready for the big rush.

PIFCO LTD · PIFCO HOUSE · WATLING STREET · MANCHESTER · 4

**LAST CHANCE TO ORDER BEFORE THE LAUNCH!**

# GUAVIN

*rich new source of natural goodness*

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Guavin is completely new; a unique and delectable blend of the juices of sun-drenched guavas and luscious black grapes — rich in natural Vitamin C and pure grape glucose. Guavin contains more natural goodness than any other fruit drink on the market. It's a *natural* best-seller!

**National Advertising Starts  
OCTOBER 4<sup>TH</sup>**

with frequent, dominant advertisements in the mass-circulation women's magazines.

**WOMAN • WOMAN'S DAY • WOMAN'S REALM**

Your wholesaler has stocks. Place your order now and profit from the first sales rush.

**LOOK!**

This much Guavin provides a full day's requirements of sunshine Vitamin C plus natural, energy-giving glucose.

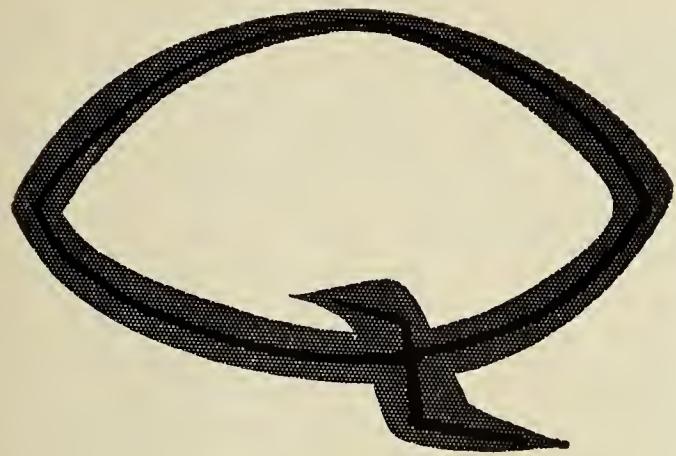
Guavin is 100% fruit juice with no added colouring or flavouring matter. Look for the amber bottle (used to protect the Vitamin C) and the golden Guavin label. Guavin can be a rich new source of profits for you!

RETAIL  
**2<sup>1</sup>/<sub>2</sub>9**

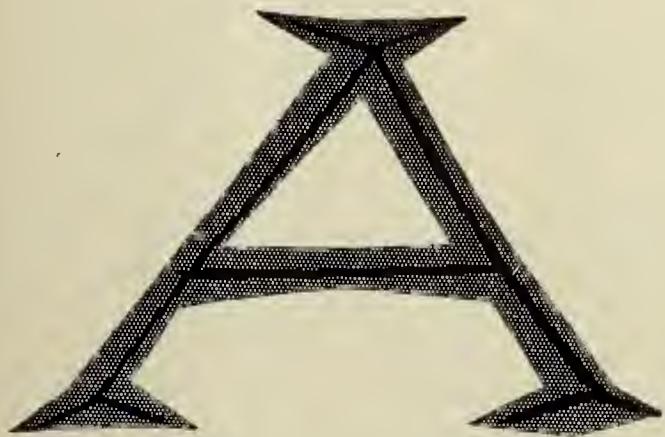
Bottle contains  
12½  
fl. ozs.  
min.



**PASCALL-KNIGHT LTD.** Est.  
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**Do mothers ask  
your advice about  
baby feeding?**



Of course they do. And your advice is particularly valuable to those whose babies are at the mixed feeding stage. You know that a balanced and varied diet trains growing appetites along healthy lines.

That's why you tell mothers about all the 24 kinds of Heinz Baby Foods. You help them, too, to pick out from your displays, varieties that they haven't tried before.

Already well over 1 million cans of Heinz Baby Foods are eaten every week and there is still a huge potential in this growing market. More mothers will be encouraged to buy from you if you stock *all* the varieties and keep them on display.



**YOU and HEINZ<sup>57</sup>**

together help  
build healthy babies—  
make healthy profits too!



# THE CHEMIST AND DRUGGIST

ESTABLISHED 1859

The weekly newspaper for pharmacy and all sections of the drug, pharmaceutical and fine chemical, cosmetic, and allied industries

*Official organ of the Pharmaceutical Society of Ireland  
and the Pharmaceutical Society of Northern Ireland*

Volume 170

September 27, 1958

No. 4101

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PUBLISHED BY  
MORGAN BROTHERS (PUBLISHERS), LTD.,  
at 28 Essex Street, Strand, London, W.C.2

Telephone: Central 6565  
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Branch Offices:

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## SPECIAL BONUS OFFER

Buy 'VASYLOX' on  
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### **14 to the dozen**

on orders of three dozen or over

To qualify for this offer complete dozens of  
spray and dropper packs may be assorted

**The offer closes on October 31st**

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Coll.	
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rapidly relieves nasal congestion



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(THE WELLCOME FOUNDATION LTD.)



# The CHEMIST AND DRUGGIST

Volume 170

SEPTEMBER 27, 1958

No. 4101

## Increased Retention Fee PRIVY COUNCIL APPROVAL SOUGHT

THE proposal that pharmaceutical chemists' annual retention fee should be increased to £5 5s. from January 1, 1959 (*C. & D.*, July 12, p. 41) has been submitted by the Society's Council to the Privy Council for approval.

At a special meeting of the Council held at Llandudno on September 18, the Council confirmed the proposal to alter the by-laws to provide for the increase.

### Key Industry Duty

#### MANY CHEMICALS ADDED TO LIST

THE Board of Trade has made the Safeguarding of Industries (Further Supplementary List of Synthetic Organic Chemicals, etc.) Order, 1958, introducing a supplementary list of synthetic organic chemicals, etc. which are liable to Key Industry Duty. The Order, which comes into operation on September 27, is S.I. No. 1584. The list (Key Industry Duty List K) is:—

3-Amino-1-(2,4:6-trichlorophenyl) pyrazol-5-one  
Amisometradine  
Azoformamide  
*tri*Barium di-(pyruvate enol phosphate)  
(Benzothiazol-2-ylthio)acetic acid  
 $\alpha$ -Bromo- $\alpha$ -ethyl-n-butyro-p-phenetidide  
 $\alpha$ -Bromoisovalero-p-phenetidide  
*p-tert*Butylcyclohexanol  
Calcium nicotinate  
 $\beta$ -monoChloropropionic acid

Chlorothiazide  
Cyclohexanone peroxide  
4 : 4'-Diamino-3 : 3'-dichlorodiphenylmethane  
2 : 5-Ditertamyl quinol  
1 : 3-Dibromo-5 : 5-dimethylhydantoin  
4 : 7-Dichloroquinoline  
*Di-n*-dodecylamine  
Dimenhydrinate  
*N-n*-Dodecyldimethylamine  
2-Hydroxy-4 : 6-dimethylpyrimidine  
*NN'*-Di(*p*-nitrophenyl)urea  
*Di-n*-octadecylamine  
Diphenhydramine  
*Diisopropylxanthogen* disulphide  
Ethyleneurea  
Florantyrene  
*n*-Hexadecylamine  
*n*-Hexadecylammonium acetate  
*o*-2-Hydroxyethylaminophenol  
*o*-2-Hydroxyethylaminophenol hydrochloride  
2-Hydroxyethylhydrazine  
*NN'*-Di(*p*-nitrophenyl)urea 2-hydroxy-4 : 6-dimethylpyrimidine complex  
1 : 2 : 2 : 6 : 6-Pentamethylpiperidine hydrogen tartrate  
5-Phenylhydantoin  
Propantheline bromide  
Quinoline-8-sulphonic acid

Theophyllin-7-ylacetic acid  
2 : 4 : 6-Tri(dimethylaminomethyl)phenol  
2 : 4 : 6-Trimethylpiperidine  
*Tri-n*-propyltin acetate  
*Tri-n*-propyltin chloride  
*Tri-n*-propyltin laurate  
*Di-(tri-n*-propyltin) oxide  
Vitamin A (synthetic) and its acetate and palmitate

### Ironmongers and Poisons

#### AN OFFENDER FOR THIRTY YEARS!

THE sale of poisons was referred to at a meeting of Dundee ironmongers recently, when one member stated that he had been told by an inspector that he had been committing an offence for thirty years by selling for gassing rabbits a product (Cymag) that should only be sold through a chemist. He said it appeared that the interpretation of the law on the sale of poisons could vary from one local authority area to another, and that the Pharmaceutical Society, at the request of the Scottish Home Department, was investigating the position. When it was suggested that the Scottish Office would probably make a standard ruling that would result in ironmongers not being allowed to sell at least that particular poison, the chairman said he would deprecate any such action. It was not a matter of loss of profit, but it would prevent the ironmonger giving a necessary service to farmers. A member suggested that the best way round the difficulty would be for ironmongers to arrange with a neighbouring chemist to stock the commodity and put orders to him.



SCIENCE SESSION: A section of the audience at one of the sessions of the British Pharmaceutical Conference on September 16.

## Boots' Price Reductions

### TWELVE PRODUCTS AFFECTED

PRICE reductions ranging from 4½ per cent. to 20 per cent. covering twelve of their branded products were announced by Boots Pure Drug Co., Ltd., on September 23. The reductions took effect on September 24. "These reductions," said Mr. J. P. Savage (chairman of the company) "are in the main a reflection of a recent tendency for the price of certain raw materials to fall in world markets. Some are made possible by improvements in manufacturing methods. We are able to bring down these prices in the face of a general increase in wages, at present pending for our factory workers, and despite increased manufacturing overheads due to the rating revaluation of properties. We have also undertaken to make no increase in the prices of our own branded products sold freely over the counter at least until the end of the calendar year, thus covering the whole of the Christmas-shopping period. If the present trend continues and further reductions are seen in the cost of raw materials it is our hope to be able to announce further price reductions in the future."

The reductions are as follows:—

	Old Price	New Price
	s. d.	s. d.
Halibut-liver oil capsules		
25	1 0	1 1
50	1 11	1 9
100	3 6	3 0
Besyet cornflour 1 lb.	1 3	1 0
Zinc and castor oil cream	tin	9 8½
2 oz.	1 0	1 1
4 oz.	1 7	1 6
Besyet custard powder	12 oz.	1 4½
Glycerin of thymol pastilles	2 oz.	1 4½
Throat pastilles	2 oz.	1 4½
Glycerin, honey and lemon jubes	3 oz.	1 0 10½
Glycerin, honey and blackcurrant jubes	3 oz.	1 0 10½
Besyet honey,		
clear	8 oz.	1 8 1 6
	16 oz.	2 10 2 6
thick	8 oz.	1 8 1 6
	16 oz.	2 10 2 6
Bicarbonate of soda, culinary	1 lb.	7 6
Besyet baking powder	8 oz.	1 0 11
	16 oz.	1 10 1 9

## Hospital Design

### UNIQUE CARDIFF COMPETITION

AN architectural competition for the design of the new Cardiff teaching hospital and Welsh national school of medicine will probably be opened in the near future. The Minister of Health (Mr. Derek Walker-Smith, Q.C.), on September 16, spoke of preliminary work in the planning of the new Cardiff teaching hospital and Welsh national school of medicine. The board of governors will proceed to the next stage, the appointment of the architects, and it is their intention to hold an archi-

tectural competition. On the same day, when opening an old people's home at Newport, Monmouth, he said "In 1901, one person in twenty-one was over sixty-five years of age, by 1957 the proportion was one in nine, and by 1975 it was estimated that it would be one in seven. At present there are two people over pensionable age for every nine of working age, that is twice as many elderly people in relation to workers as there were fifty years ago. In the last ten years the number of those over seventy-five has increased by a quarter. In 1900 there were 92,000, today there are 281,000, and by 1977 there will be nearly half a million."

## Medicine Mix-up

### PATIENTS HAD SAME SURNAME

WEST Bromwich Executive Council decided on September 12 to recommend to the Minister of Health that, in addition to issuing a reprimand, £10 should be withheld from the remuneration of a chemist who supplied the wrong medicine to a three-year-old girl suffering from tonsilitis. The Pharmaceutical Services Committee had recommended that the Council should merely reprimand the chemist. According to the report to the Council on the investigation, the chemist had to make up prescriptions the same evening for two patients with the same surname but different initials—the child and an adult—and the wrong medicine was handed over for the child. At the inquiry of the Pharmaceutical Services Committee the chemist's representative agreed that it was known the same evening that the wrong medicine had been handed over and no remedial action was taken at once because it was assumed that the error would be spotted.

## Element 102

### CLAIM TO BE FIRST TO PRODUCE IT

SPEAKING at the conference held recently at Geneva on the peaceful uses of atomic energy, Dr. Glenn T. Seaborg (University of California, U.S.A.), expressed doubts whether the artificial element 102 had in fact been prepared in 1957, as claimed, by a team of British, American and Swedish scientists. He was much more certain he had isolated the element in his laboratory by a method "remarkable in its sophistication even in the atomic field." The method was to bombard the curium isotope with an uncommon isotope of carbon, using refinements whereby the nuclei of atoms formed from radioactive decay were removed almost immediately. As those nuclei were eventually identified as being formed by the radioactive decay of element 102, he considers that his method produced an isotope of element 102.

## Chemists and Television

### SURVEY OF MIDLANDS VIEWERS

A MARKETING investigation carried out by Associated Television, Ltd., among Midland chemists states that 70 per cent. watch I.T.V. and 31 per cent. watch it every day. Asked to give an opinion upon the most effective single

type of manufacturers' advertising, 62 per cent. favoured television. As a result of television advertising 23 per cent. said that they had added new products to their stock during the last six months.

## Closed Pharmacies

### INADEQUATE NOTICE GIVEN

CEFN Co-operative Society, Ltd., has closed down its pharmacies at Rhos, Cefnmaur and Johnstown. In notifying the Denbighshire and Flintshire Pharmaceutical Services Committee of their action, the society stated that the keys to the Dangerous Drugs cupboards had been placed in the custody of another chemist. They had been compelled to close the premises because of circumstances beyond their control and they regretted not being able to give the three months' statutory notice demanded by the Health Service regulations. At a meeting of the Pharmaceutical Services Committee it was decided to call upon the co-operative society to explain their actions. The chairman said there had been a clear breach of contract for which a penalty could be imposed. One member of the Committee said the managers of the shops had left to fill other positions and it had been difficult to replace them.

## Conservative Conference

### RESOLUTIONS ON AGENDA

AMONG the resolutions submitted for consideration at the annual conference of the Conservative party to be held in Blackpool, October 7-11, is one urging that all goods imported from foreign countries be marked with the name of the country of origin. Another is concerned with the effect of cut-price trading, and "the semi-monopoly conditions growing up under the guise of collective selling in the grocery trade, and calls upon the Government to safeguard small traders to ensure that they are not squeezed out of business by the multiple stores and super-markets to the ultimate detriment of the consumer."

## Imports of Machinery

### NO RELAXATION FOR CHEMICAL PLANT

NOTICES to Importers Nos. 880 and 881 issued by the Board of Trade on September 24 give details of the measures of import liberalisation announced by Sir David Eccles in Montreal on September 17. Among other things the changes affect imports of machinery from the dollar area but chemical plant, scientific and industrial instruments are not among the items being liberalised.

## Croydon Nurses Centre

### OPENED BY MINISTER OF HEALTH

OPENING a new headquarters of the District Nursing Association at Croydon, Surrey, on September 15, the Minister of Health (Mr. Derek Walker-Smith, Q.C.), said that the burdens on hospitals had to be eased, and that was one reason why home health and home nursing were so important. It was financially desirable to use the general practitioner and home nursing services rather than the hospital services.

## IRISH NEWS THE REPUBLIC

### Irish Drug Association

#### COMMITTEE RECEIVES LOCAL REPORTS

REPORTS from several local associations were discussed at a recent meeting of the committee of the Irish Drug Association. Limerick Retail Chemists' Association wrote about supplies of poliomyelitis vaccine; a report was received on the annual meeting held in Athlone of Westmeath Pharmaceutical Federation; Galway Pharmaceutical Chemists' Association held meetings in connection with the cutting of retail prices for certain chemists' lines by a non-chemist trader, and decided on a course of action. In view of the efforts being made by promoters of various "pools" to obtain discounts for their members, I.D.A. members were again reminded that it was against the rules of the Association to give discounts or to allow their names to appear on discount lists. I.D.A. members were urged not to indulge in newspaper controversy by letter, or through telephone interviews, particularly in relation to prices and vaccine supplies. The question of direct supplies to farmers, institutions, communities, etc., by manufacturers, agents, and small wholesalers was under consideration, and is to be further considered at a future meeting.

### NEWS IN BRIEF

DURING the night of September 11-12, the pharmacy of Mr. D. R. Gibbon, M.P.S., 104 Llewellyn Street, Pentre Glam, was broken into and the following stolen: 5,000 phenobarbitone tablets, gr.  $\frac{1}{2}$ ; 100 phenobarbitone tablets, gr. 1; and 100 pethidine tablets.

FOLLOWING a fire at the pharmacy of J. Brocklehurst, Ltd., 42 High Street, Ashford, Kent, on September 11, in which a large amount of stock was destroyed, the premises were closed. The business was reopened in neighbouring premises on September 22.

### SPORT

**Golf.**—LIVERPOOL CHEMISTS' GOLFING SOCIETY, at Southport and Ainsdale golf club, on September 10. Captain's prize, C. S. Cullen (4), 74; DIVISION A: Sunner prize, K. Thomson (9), 75; Maw's prize, L. Davies (11), 78; DIVISION B: Crookes' cup, M. Atherton (18), 78; Ayrton prize, P. Symons (18), 80.

MANCHESTER PHARMACEUTICAL GOLFING SOCIETY, at Wilmslow golf club on September 17. Avlon trop'y, 1. J. B. Jenkins, 72; 2. Dr. A. H. Frazer, 73. F. G. Lloyd holed out in one, and eight other members had twos.

IRISH CHEMISTS' GOLFING SOCIETY, at Elm Park, Dublin, recently. Prizes were given by Boileau & Boyd, Ltd. Inclement weather limited the competition to twelve holes strokes, of which the results were: 1, J. T. Foley (13), 48 $\frac{1}{2}$ ; 2, J. Burke (13), 48 $\frac{1}{2}$ ; 3, J. O'Connor (16), 48 $\frac{1}{2}$ ; Bogey competition, 1, M. L. Cashman (9), 1 down; 2, T. J. Lynch (6), 2 down; 3, R. Tierney (11), 2 down. Unlike the Elm Park match the chemist-golfers played in brilliant sunshine at Clontarf, recently, where the winners were: First strokes, C. J. Staunton (13), 64; Second strokes, J. Mason (10), 68; Best first nine, E. Connolly (11), 34 $\frac{1}{2}$ ; Best second nine, B. R. Smith (9), 33 $\frac{1}{2}$ ; First bogey, W. Dalton (10), 1 down; Second bogey, D. Arnold (10), 1 down. The final outing of the season is to be held at Hermitage golf club on October 1.

## TOPICAL REFLECTIONS

By Xrayser

### Practical Training

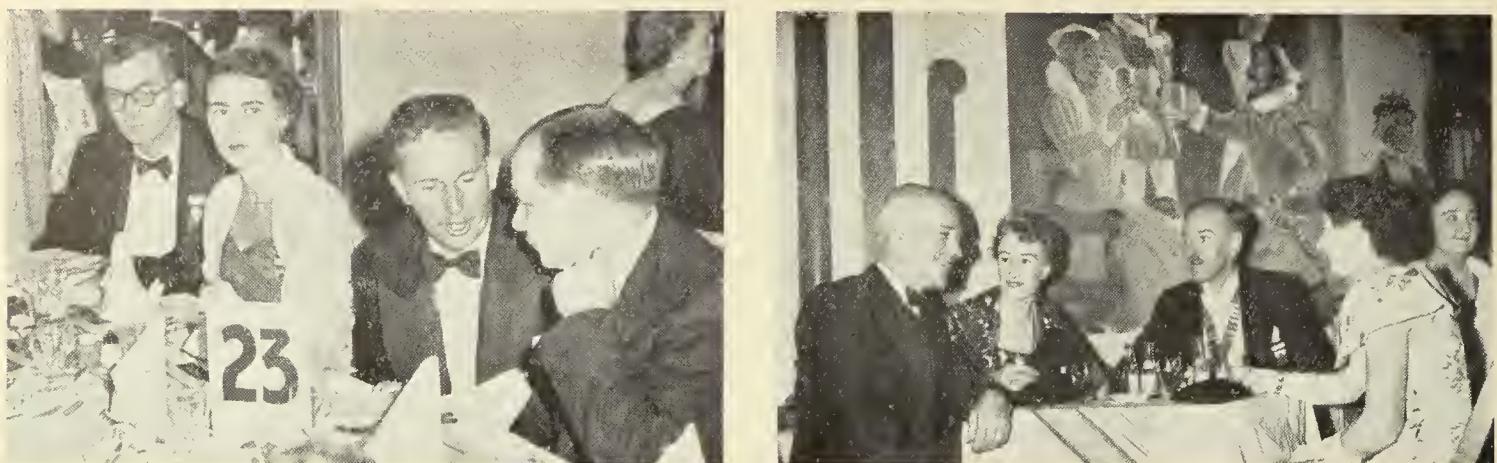
Nowhere, I think, have I seen so clearly emphasised the gulf between the academic and the practical outlook as was made apparent at Llandudno last week. The topic for the first professional session (p. 307 *et seq.*) was the responsibility of the pharmacist to his post-graduate student (I take it, despite the title, that the description is loosely applied to the unapprenticed holder of the Pharmaceutical Society's diploma, as well as to the graduate of a university). It seemed to me that the thoughtful approach by Mr. G. T. Espley was a model of its kind. It was essentially constructive, and it faced the realities of the present position in the most practical way. One or two of the points he raised are very important: for example, that the first lesson to be learned by both student and master is that the two essential ingredients—the academic and the practical—are complementary to each other. It is only in practice that the trainee has the opportunity of applying his acquired knowledge to a given set of actual circumstances, such as the discussion with a doctor of the pharmacology of a new drug, a point foreseen by Mr. Espley. The speaker had sound advice to offer on such varying topics as ethics and attendance at branch meetings. The choice of Mr. Espley was an excellent one, and his philosophic and experienced approach to his subject was admirable. He made it perfectly clear that there are certain "intangibles" that cannot be instilled in the academic atmosphere, not the least of them being human relationships and the attitude towards the world in general. The academic viewpoint, put by Dr. Parkinson, was mainly a historical account of the steps which have led to the present position, and he appeared to me to be more concerned with defending the position of the educationalist than with offering constructive suggestions for practical training, either in retail or hospital pharmacy.

### Discussion

In determining the direction in which discussion will go at a meeting, a great responsibility rests upon the opener, for on numerous occasions he charts the course. I thought that the opening remarks of Professor E. Shotton were less than fair to Mr. Espley. Professor Shotton said that he thought that Mr. Espley should realise that the undergraduate course of the School of Pharmacy, University of London, was an attempt to give a technological background to all aspects of pharmacy, and not to one particular aspect. Since Mr. Espley's brief was "The retail problem today," the observation struck me as to some extent lacking in relevance. Other points made by Professor Shotton surprised me. He said, "We have also tried to make the student think logically for himself," and then he went on to complain that Mr. Espley was underestimating the material instinct of the present-day student. From experience they had found, in trying to place students for vacational work, that at the end of the second year they were meeting with opposition when they wanted the student to go into industry, for the reason that he could get £8 per week in retail and only £5 in industry. In post-graduate training the reverse appeared, for industry paid more to the graduate than retail did. He thought that the student would "go for the money." That may be one of the penalties of trying to make the student think logically for himself!

### Recognition of Premises

It was to be expected that a reply would be forthcoming to Dr. Parkinson's remarks to the effect that some premises left a good deal to be desired for training purposes, and that "it is tempting to suggest that, rather than let such a rot spread further, it would be as well to take the training out of the hands of the practising pharmacist." Mr. Bloomfield (a member of the Pharmaceutical Society's Council) said that to condemn the whole for the sins of the few was folly. Control of premises for training purposes had been discontinued because the number of premises disallowed had been quite small. It struck me that that was not a very sound reason for ceasing recognition of suitable premises. If the conditions complained of exist at all, control seems to me to be the more necessary.



## CONFERENCE VISITORS FROM ALL POINTS OF THE COMPASS

**Top left:** Mr. H. L. Crossley, Walthamstow, pictured at the banquet with a distinguished Chelsea trio: Drs. A. E. Robinson, A. H. Beekett and N. J. Harper.

**Top right:** Mr. J. Crossland, Dover, with Miss J. B. Tillott, London, W.2, the president of the Guild of Public Pharmacists (Mr. J. W. B. Fish, Dover); and Miss M. E. Hember, Brighton.

**At left:** Miss J. M. Low, Mr. and Mrs. L. Wood, Mr. W. Low and Miss E. Gray, all from Durham, find out from the seating plan where they are to sit at the banquet.

**Second left:** Two families with but a letter different pictured at the banquet reception on Thursday evening. Left to right, Mrs. and Mr. K. J. Madge, Mr. M. J. Madge, jun., Mr. A. G. Mervyn Madge and Mrs. Madge.

**Below:** Conference members from the Republic of Ireland at the Conference ball.



Scots and Scots-in-exile get together for an informal photograph at the Conference ball.



Welsh by birth, language or residence, "home once again" in Llandudno.



Northern Ireland supports the Conference with a numerous contingent from the six counties.

## LEGAL REPORTS

### Doctor on D.D.A. Charges

CHARGED with offences that had come to light as the result of routine inspection of chemists' registers, Dr. Kenneth Stanley Shaw, Lytton Avenue, Wolverhampton, pleaded guilty at Wolverhampton, on September 15, to obtaining quantities of pethidine contrary to the Dangerous Drugs Act, 1951. Describing how he obtained the drugs, the prosecution said that whilst acting as a locum tenens between July 8 and 27 he wrote out prescriptions in the names of patients. Defending solicitor said his client took pethidine only at night to gain relief from severe colonic spasms and had developed a tolerance to the drug. A fine of £50 was imposed on the first charge, and the defendant was given a conditional discharge on another five charges provided he continued the treatment he was receiving in hospital.

### Forged Prescriptions

AT Clerkenwell, London, magistrates' court on September 4, a detective said that a chemist's suspicions had led to the discovery that Adel Quinn, 43 Old Gloucester Street, London, W.C.1, had obtained over 1,000 Dexedrine tablets in a period of nine months. Quinn pleaded guilty to obtaining, on August 20, at 146 Holborn, by means of a forged prescription, twenty Dexedrine tablets, value 2s., and to obtaining similarly on August 21, at 14 Sicilian Avenue, W.C.1, twenty Dexedrine tablets. A detective said that altogether Quinn had acquired 1,000 tablets in that way. The matter came to police notice when a chemist reported on the number of tablets apparently supplied. He produced a prescription which caused inquiries to be made. As a result the accused was stopped on August 21, when she had obtained a supply of the drug. She then made a statement admitting she was an addict, and that she had been obtaining supplies for nine months. Since then she had been legitimately treated by a medical practitioner and was being treated for her addiction. After being remanded for a week in custody for a medical report, she was sentenced to a total of six months' imprisonment the magistrate saying "I hope that by the end of that period you will be thoroughly cured of this addiction to drugs." Defendant, who had told the court that she was extremely sorry, was reported to have three previous convictions for offences of dishonesty.

### Stole Prescription Forms

DEPRESSED because he was out of work, Anthony Dillingham, 16 Greenland Road, London, N.W.1, stole National Health forms and forged prescriptions for Drinamyl tablets. Clerkenwell magistrates' court was told on September 19. Dillingham, who appeared on remand, pleaded guilty to two charges of stealing blank prescription forms, the property of Dr. I. Lipman, 34 Hampstead Road, N.W.1, on September 10 and 11. He also admitted obtaining on September 10, at 173 Camden High Street, N.W.1, thirty-six Drinamyl tabs-

lets, value 2s. 6d., and the property of Timothy Whites & Taylors, Ltd., by means of a forged National Health prescription, and a similar charge of attempting to obtain another forty tablets the following day at the company's branch at 107 Camden Road, also by means of a forged National Health prescription. A detective-sergeant said that Dillingham stole the two forms while the doctor's consulting room was temporarily unattended. He made out prescriptions for Drinamyl tablets but on the second occasion the pharmacist realised it was a forgery and called the police. Dillingham admitted what he had done and told the police he had successfully obtained tablets the previous day at another branch of the company. Dillingham's mother told the magistrate that her son suffered from nervous depression. "I have asked my doctor to prescribe these tablets for him but to let me have control of them," she said. Dillingham, said to have one previous conviction for being a suspected person loitering with intent to commit a felony in May 1957, said: "There is nothing much I can say, except that I am very sorry for the trouble and inconvenience I have caused." He was put on probation for a year.

## COMPANY NEWS

**PFIZER, LTD.**—Mr. Philip V. Colebrook (production and research director) has been appointed managing director of the company.

**MILES LABORATORIES, LTD.**—Mr. J. S. M. Dashwood, B.A., A.R.I.C., has been appointed director of production at the company's factories in Bridgend, Glam.

**BEECHAM GROUP, LTD.**—A first interim dividend of 7 per cent., less tax, has been declared on the Ordinary shares of the company, on account of the year ending March 31, 1959.

**ASPRO - NICHOLAS, LTD., and CLINICAL AND GENERAL INDUSTRIES, LTD.**—As a result of discussions between the boards of Clinical & General Industries, Ltd., and Aspro-Nicholas, Ltd., it has been agreed that Aspro-Nicholas will acquire from Clinical and General its holdings in Clinical Products, Ltd. The consideration is the issue of 120,000 Ordinary 5s. units in Aspro-Nicholas and the payment of about £127,000 in cash. The transaction is subject to Treasury consent and the approval of the shareholders of Clinical and General.

**VITAMINS, LTD.**—In the annual report accompanying the accounts for the year ended March 31, 1958, the chairman (Mr. H. C. H. Graves) comments on the increased cost of the National Health Service. Of the £301 millions increase since 1948 hospital costs (for salaries, fuel, provisions, bedding, etc.) have risen £202 millions and only £28 millions of the nine-year increase went to drug manufacturers for drugs which, among other things, "have saved the lives of several millions of people in this country alone since the N.H.S. started." In other words for every extra £1 paid for the Service the drug manufacturer has had

1s. 10½d. In their eagerness to assail him for the 1s. 10½d. the critics forgot the other 18s. 1½d. For accounts see *C. & D.*, August 16, p. 164.

**ILFORD, LTD.**—As a result of the deal with Imperial Chemical Industries, Ltd. (see *C. & D.*, August 30, p. 210), the company will not have to raise additional capital in the near future in order to carry through its planned development programme. While the directors believe that the ability to call on the technical resources of I.C.I. must prove of great benefit to the company in the long term they warn shareholders not to anticipate spectacular results immediately. Ilford's turnover in the current year has been well maintained in spite of the increasing intensity of the competition and the exceptionally bad weather affecting all Western Europe including Scandinavia. Profit margins, however, continue to decline with the result that profits will not this year reach the 1957 peak and the cover for the dividend of 16 per cent. on the Ordinary shares will, therefore, be reduced this time below the comfortable figure of 2·8 times at which it stood last year.

## New Companies

P.C. = Private Company; R.O. = Registered Office

**P. A. TURNEY, LTD. (P.C.).**—Capital £25,000. To carry on the business of dealers in fertilisers, chemicals, etc. Directors: Peter A. Turney and Enid P. Turney. R.O.: The Garage, Middleton Stoney, Oxon.

**C. & H. (BARTON), LTD. (P.C.).**—Capital £100. To carry on the business of wholesale and retail chemists, druggists, etc. Directors: Norman L. Crick and Alec A. Holton. R.O.: 21 Cardiff Road, Luton, Beds.

**HARRY DUMLER, LTD. (P.C.).**—Capital £1,000. To carry on the business of chemists, druggists and librarians, etc. Directors: Henry C. Dumler, M.P.S., and Eva M. P. Dumler. R.O.: 479 Upper Richmond Road West, London, S.W.14.

**F. J. HICKS, LTD. (P.C.).**—Capital £100. To carry on the business of retail and wholesale chemists, etc. Subscribers: Joseph J. Jayson and Francis Geraghty. The first directors are to be appointed by the subscribers. R.O.: 34 South Molton Street, London, W.1.

**GOODBODY (N.I.), LTD. (P.C.).**—Registered in Belfast. Capital £10,000. To carry on the business of chemists, druggists, etc. Subscribers: Loyis H. Taylor, 2 Massey Park, Belfast, and William J. Connelly. The first directors are not named.

**J. SPAANDERMAN, LTD. (P.C.).**—Capital £6,000. To acquire the business of a dispensing chemist carried on by P. D. J. Spaanderman, M.P.S., at Sutton-in-Ashfield. Directors: Pieter D. J. Spaanderman, M.P.S. (director, National Pharmaceutical Union, Ltd., etc.), and Freda Spaanderman. R.O.: 203 Sutton Road, Huthwaite, Sutton-in-Ashfield.

**PORTOVAC, LTD. (P.C.).**—Capital £100. To carry on the business of manufacturers of and dealers in surgical and medical instruments and equipment, etc. Directors: John L. Orth,

Victor Ford, Stanley Penn and Frederick C. Spurr, R.O.: 235A Junction Road, London, N.19.

**ANTILLIA MANUFACTURING & SUPPLY CO., LTD. (P.C.)**—Capital £200. To carry on the business of manufacturers of and dealers in toothpaste, polishes, etc. Directors: Sydney A. Aird and Carmeta C. Aird, R.O.: 4 Robinson Road, Tooting, London, S.W.17.

## BUSINESS CHANGES

THE pharmacy of Lloyd & Son (F. C. Lea), 1 Old Palace Terrace, The Green, Richmond, Surrey, has been closed.

**BARBER ELECTRICAL SERVICES, LTD.**, are removing to Weston Airport, Weston-super-Mare, Somerset, on October 1.

### Appointments

**GOLDEN, LTD.**, 7 Grosvenor Street, London, W.I, have appointed Mr. D. P. Roberts their representative for North London and Middlesex and Mr. F. L. Waters for South London.

**JAMES A. JOBLING & CO., LTD.**, Wear Glass Works, Sunderland, have appointed Mr. Vernon S. Porter their advertising and publicity manager.

**COLEMAN & CO., LTD.**, Westwick Street, Norwich, have appointed Mr. D. W. Ramsbottom their representative for N.W., N.E., W.C., and E.C. postal districts of London and the county of Essex.

**EVANS MEDICAL SUPPLIES, LTD.**, Speke, Liverpool, 19, announce that Mr. A. W. D. Cummings (formerly their representative in the Bristol area), has been appointed sales manager with the Burma Pharmaceutical Industry, Rangoon; Mr. G. R. Loader has been appointed representative in East Africa and has left for Nairobi.

**DISTILLERS CO. (BIOCHEMICALS), LTD.**, The Broadway, London, S.W.19, have made the following additional appointments to their medical and pharmaceutical force of representatives: Mr. J. F. Armstrong (Yorkshire, North Riding, and S.E. Durham); Mr. E. M. Bradbury (S.E. London); Mr. D. J. Dennis (Leicestershire and Northamptonshire); Mr. J. Ferguson (S.W. England); and Mr. C. K. Jones (N. Wales and Cheshire).

**RICHARD HUDNUT, LTD.**, Eastleigh, Hants, have appointed Mr. Harold Rather head of the company's facial cosmetics division, a new division formed to handle the expansion planned for Hudnut cosmetics. He will be responsible for the advertising and selling of facial cosmetics, while Mr. A. W. D. Luddington continues to head the Hudnut division, which specialises in home "permanents," shampoos, etc.

**GEIGY PHARMACEUTICAL CO., LTD.**, Roundthorn Estate, Wythenshawe, Manchester, 23, announce the following additions to their representative staff: Messrs. Duncan G. Bradley, M.P.S.; Stanley M. Loxley, M.P.S.; Robert J. Tomlinson, M.P.S.; Bernard Wright, M.P.S.; Kenneth Graham, M.P.S.; Alan Walton, B.Sc., F.P.S.; Graham Gilbert, F.P.S.; Kenneth C. Biggs, F.I.M.L.T.; Geoffrey Downing,

F.I.M.L.T.; Lionel G. Burton, M.P.S.; Kenneth H. Moncad, M.P.S., D.B.A.; and William Kilshaw.

## MARRIAGES

**O'NEILL—MAGNER**.—Recently at Cork, Michael J. O'Neill, L.P.S.I., to Mary J. Magner, assistant, both of Youghal, co. Cork. Present address: P.O. Box 43, Arusha, Tanganyika.

**GARRETT—DUNN**.—At Bradford Cathedral on September 20, Jeffrey Roger Garnett, M.P.S., Horton Grange Road, Bradford, to Maureen Dunn of Hull.

**CURRIE—MASON**.—At St. Paul's Church, Birkenshaw, near Bradford, on September 20, Brian Currie, M.P.S., Union Road, Heckmondwike, to Pamela Mason, Cross House, East Bierley.

## DEATHS

**ARMSTRONG**.—On August 27, Mr. Frederick Palmer Armstrong, M.P.S., 69 Thurlestone Avenue, Longbridge Road, Ilford, Essex. Mr. Armstrong qualified in 1931.

**BAMBROUGH**.—On August 31, Mr. Wilfred Ernest Bambrough, M.P.S., Glenayr, Fronks Road, Dovercourt, Essex. Mr. Bambrough qualified in 1899.

**GILLIES**.—On September 9, Mr. Gordon Gillies, M.P.S., 92 Money Bank, Wisbech, Cambs. Mr. Gillies qualified in 1930.

**JONES**.—On September 7, Mr. James Jones, M.P.S., 56 Shakespeare Avenue, Milford Haven, Pembrokeshire, aged 82. Mr. Jones qualified in 1907.

**SHAW**.—At his home, 40 Wentworth Park Avenue, Harborne, Birmingham, on September 10, Mr. Bernard Wayne Shaw, M.P.S., aged sixty-three. Mr. Shaw, who had been ill for a considerable period, was in business at 185 High Street, Harborne.

## PERSONALITIES

**MR. H. J. SPRIGGS**, sales manager of Dalmas, Ltd., Leicester, has been elected chairman of the Leicester branch of the Incorporated Sales Managers' Association.

**SIR ALEXANDER FLECK, F.R.S.** (chairman, Imperial Chemical Industries, Ltd.), has been appointed chairman of the Scientific Advisory Council of the Ministry of Power. The council was set up in 1948 to advise the Minister on the scientific aspects of his statutory duties.

## PURCHASE-TAX-FREE DRUGS

### New list of exempted medicines

THE Purchase Tax (No. 2) Order, 1958 (S.I., 1958, No. 1495), which came into operation on September 22, extends the schedule of essential drugs and medicines exempt from purchase tax under the Purchase Tax (No. 1) Order, 1958 (S.I., 1958, No. 466) which is revoked.

In the Order opportunity has been taken to amend some entries by introducing a number of drugs under the approved name given recently by the British Pharmacopœia Commission. They include:—chlorphenoctrin amsonate, pecazine, perphenazine, prochlorperazine, bromodiphenhydramine.

All drugs and medicines previously exempt remain exempt under the new Order. The additional items now free of purchase tax, together with the proprietary preparations affected (where known) and their manufacturers are given below:—

#### Under Head I

The entry for chlorhexidine, and salts thereof, is now extended to include pessaries which contain not less than 1 per cent. of any one of those substances as sole active ingredient and are prepared for veterinary use or for use in obstetrics. (Hibitane pessaries veterinary, Imperial Chemical Industries, Ltd., Pharmaceuticals Division).

#### Under Head II

n-Butyl N-phenyldithiocarbamate. Chlorine substituted 8-hydroxyquinoline. Dextromoramide (R.875, Palfium, M.C.P. Pure Drugs, Ltd.). Paracetamol (Panadol, Bayer Products, Ltd.; Tabalgan, West Pharmaceutical Co., Ltd.; Eneril, A. G. Nicholas, Ltd.).

#### Under Head III

2-n-Butylamino-1-p-hydroxyphenylethanol, and salts thereof (Vasculit, Pfizer, Ltd.).

4-Butoxy - 4 - dimethylaminodiphenylthiourea (1906, CIBA Laboratories, Ltd.). The entry for cortisone and analogous steroid hormones and esters thereof is extended to include these substances when mixed with hexachlorophane.

N - (3-Dimethylaminopropyl) iminodibenzyl, and salts thereof (Tofranil, Geigy Pharmaceutical Company, Ltd.).

10 - (3-Dimethylaminopropyl) - 2-trifluoromethyl phenothiazine, and salts thereof (Vespral, E. R. Squibb & Sons).

Hexocyclium methylsulphate (Tral, Abbott Laboratories, Ltd.).

Iminazole-4 : 5-dicarboxamide (Glycamide, Merck Sharp & Dohme, Ltd.).

The previous entry for liver extracts and active principles of liver is extended to include these substances when combined with compounds of iron.

Mephenesin mixed with paracetamol.

Meprobamate mixed with acetylsalicylic acid (Equaprin, John Wyeth & Bro., Ltd.).

4-Methyl - 1-[3-(2-trifluoromethyl-10-phenoxythiazinyl)propyl]piperazine, and salts.

The entry for 10-(N-Methyl-3-piperidylmethyl)phenothiazine which appeared in the Purchase Tax (No. 1) Order, 1958, is extended to include salts of this substance. (This item appears under the approved name pecazine, and salts thereof.)

Narcotine, and salts thereof (formerly under Head II).

3-Nitro-4-hydroxyphenylarsonic acid.

1:2:2:6:6-Pentamethylpiperidine, and salts thereof (Perolysin, May & Baker, Ltd.; Tenormal, Imperial Chemical Industries, Ltd., Pharmaceuticals Division).

The entry for vitamins, etc., is extended to include vitamins, vitamin complexes and provitamins when combined with salts of any metal other than sodium. (Gliferate, John Wyeth & Bro., Ltd.).

## NEW PRODUCTS AND PACKS

**Vitamin-C Effervescent Tablets.** — Roche Products, Ltd., 15 Manchester Square, London, W.I, announce the introduction of Redoxon effervescent tablets, 1-gm., a presentation of vitamin C for solution in water. The container holds ten tablets.

**Antibiotic in Tablet Form.** — Albamycin T in tablet form, each tablet containing 125 mgm. Albamycin (as novobiocin calcium) and 125 mgm. tetracycline hydrochloride has been put on the market by Upjohn of England, Ltd., Fleming Way, Crawley, Sussex. The tablets are in packs of sixteen and 100.

**Vaccine and Toxoid.** — Glaxo Laboratories, Ltd., Greenford, Middlesex, announce the introduction of *Haemophilus influenzae* vaccine, containing 1,000 million bacterial cells per mil. The vaccine is designed to provide protection against chronic bronchitis, which is often associated with infection by the micro-organism *H. influenzae*. A series of graduated doses is required.—Also introduced by the company is staphylococcus toxoid, containing 10 Lf/mil, for protection against recurrent staphylococcal infections such as boils and carbuncles. The toxoid conforms with the B.P., 1958, requirements.

**Nylon-net Surgical Stockings.** — E. Sallis, Ltd., Vernon Works, Basford, Nottingham, are marketing what they describe as "something entirely new" in the surgical hosiery field: the Eesimesh seamless nylon net surgical stockings. The stockings (of fishnet design) are light and airy in texture and free from unsightly or irritating seams. They are claimed to give a most attractive appearance on the leg, making over-stockings unnecessary. The surgical stockings are available in above-knee length only, with closed toes and in foot sizes 8½, 9, 9½, 10, 10½ and 11 in.

**Antiseptic Lozenges.** — Boots Pure Drug Co., Ltd., Station Street, Nottingham, announce the introduction of Strepsils, a new type of lozenge containing Dybenal (2:4 dichlorobenzyl alcohol), an antiseptic developed in the company's research laboratories. Laboratory tests are understood to have shown Strepsils to be lethal to many bacteria in one minute and they are



claimed effective against a wide range of bacteria and fungi. The indications include most common infections of the mouth and throat (tonsillitis, laryngitis, aphthous ulcers, etc.). The pack is a vacuum-sealed tin of twenty-four individually wrapped lozenges.

**Wide-spectrum Anthelmintic.** — Eli Lilly & Co., Ltd., Basingstoke, Hants,

announce the introduction of Telmid brand dithiazanine iodide, a new anthelmintic with an unusually wide coverage. Telmid is claimed effective against threadworm, roundworm, whipworm and strongyloides. No fasting or other supplementary treatment is required. The product is available in bottles of 15 and 100 specially coated violet tablets each containing 100 mgm. of the compound.

**Underblouse for Overalls.** — Women who want to keep their overalls or uniforms immaculately fresh and stain-free will welcome a new garment that



ensures protection against perspiration. The Kleinert Rubber Co., Walpole House, 91 New Bond Street, London, W.I, have produced a fine absorbent lawn underblouse with built-in dress shields; it is available in bust sizes 32-42 in., and has a low adjustable neckline.

**Grape and Blackcurrant Juice.** — GB health drink bottled by Solo Orchards, Ltd., Totteridge Lane, London, N.20, is made from "double concentrated" Spanish grape juice, blended with blackcurrant juice. The heavy concentration of juice enables a 36 per cent. natural fruit glucose (12,000 mgm. per fluid oz.) to be maintained. The vitamin C content is 20 mgm. per fl. oz. GB, which contains no added glucose or sugar, is easily assimilated by delicate digestions and is recommended for expectant and nursing mothers, babies, children, invalids and convalescents.

**Fruit Food for Infants.** — Trufood, Ltd., 113 Newington Causeway, London, S.E.1, announce the introduction of a new fruit variety of their Spoon-foods strained and homogenised foods for infants: golden plums with cereal and honey. Intended for children from about four to five months onwards, the new food makes the fifth sweet in the range and is a puree of the fruit with sugar, semolina and honey. It provides bulk in an easily assimilable form and, with its distinct flavour of plums and honey, should be acceptable to invalids

as well as infants. The pack is a glass jar sealed with the recently introduced vapour vacuum cap. Supplies are available from the Trufood Creameries at Wrenbury, Ches. Like the other products of the company, it is retailed by chemists only.

**"Miracle" Skin Cream.** — Elizabeth Arden, Ltd., 25 Old Bond Street, London, W.I, are now sending out to their stockists for sale from October 1 a new light-textured cream claimed to benefit all types of skin. The product, "Creme Extrordinaire," is rapidly absorbed and penetrates deeply. It is delicately perfumed, smoothing, and moisturising, and even, the makers claim, neutralises acid conditions of the skin where they exist. "Creme Extrordinaire" is being introduced in a special size for ten days from October 1. Thereafter it will be in three relatively high-priced sizes.

**Liquid or Cream Foundations.** — Goya, Ltd., Badminton Court, Amersham, Bucks, have created two new foundations: "Beauty All Day," a liquid emulsion containing a thin oil easily absorbed by the skin and incorporating a lanolin derivative and a humectant, recommended for normal skins or skins which tend to be oily, and "Beauty Base" for those preferring a cream foundation. Whilst being suitable for normal skins the formula of the cream is designed for those skins tending to be dry or sensitive. Both are packed in tubes and supplied in the following shades: Natural, ivory rose, honey moon, misty pink, and basque.

**Pre-focus Torch.** — Latest torch of the Ever Ready Co. (G.B.), Ltd., Hercules Place, London, N.7, is the Flarelight, a medium-priced torch with bottom-cap loading, issued in an individual carton that is designed to act as a display stand. The torch has a bright



metal finish, three-position switch, red plastic lens-ring, pre-focus bulb, and ring hanger. It uses two U2 batteries.

**Matching Bath and Nail Brushes.** — Hughes Brushes, Ltd., 32 Ajax Avenue, Slough, Bucks, have called in Mr. Keith Godwin, R.B.A., A.R.C.A., to design for them the Swan matching bath and nail brushes which are the latest in their series. The brushes are manufactured in "pearlescent" high-impact polystyrene and are available in a range of pearlescent and contemporary colours. A new technique has enabled the brush to be injection moulded in two halves, which are then joined together, enabling a saving of weight without loss of strength. The Swan nail brush is presented in a gift casket with display crown, and the bath brush in counter-display gift casket.

**Perfume With "Provocative" Name.** — Morny, Ltd., 201 Regent Street, London, W.1, announce that they have created a new perfume and given it the "provocative" name of Dare. The makers say that Dare has a "vibrant and alluring warmth which will enchant women of all ages," and claim that it is the ideal perfume for day and evening wear having a lasting quality and a "subtle blend of warmth and sophistication." Dare is issued in a flaskette, packed in black box with the name across it in cyclamen script.

**PVP in Barrier Creams.** — The British Oxygen Co., Ltd., Bridgewater House, Cleveland Row, London, S.W.1, are marketing pilot quantities of polyvinyl pyrrolidone for use in the formulation of barrier creams. They claim that the PVP has the effect of enhancing the protective qualities of such creams, and additionally gives a softening action that persists even after the hands have been washed. Experiments carried out in the laboratories of British Oxygen Research and Development, Ltd., Morden, Surrey, have shown that less than 0·2 per cent. of PVP added to the cream does not produce the desired effect. If more than 2 per cent. is added, the cream has a tendency to make the hands sticky. They therefore recommend a proportion between 0·5 and 1·5 per cent. of the total weight of the cream.

**Shavers' Travel Set.** — Gillette Industries, Ltd., Great West Road, Isleworth, Middlesex, are shortly introducing a completely new travel razor set specially designed to meet the needs of men who require a spare razor set for use when travelling and also closing a gap in the price range of Gillette razors. The set comprises a Gillette one-piece razor with dispenser of six blue Gillette



blades in imitation-pigskin travel case. Being plated and polished, the razor does not rust. The case is damp resistant and may be cleaned with a cloth.

**Worm Chocolates.** — Ernest Jackson & Co., Ltd., Crediton, Devon, have formulated a new product, Jackson's worm chocolates, formula P, which they describe as a departure from the santonin-and-calomel chocolate worm cakes that have been in use for many years. The active ingredient is piperazine adipate (gr. 9 per chocolate), associated with a small dose (gr. 2) of

prepared jalap (intended to be insufficient to cause undesirable purging). The chocolates are packed singly in foil enclosed in an envelope, and the envelopes are in carton of 1 doz. Both envelope and carton bear the dose range for children from nine months upwards and for adults. As with other piperazine preparations for threadworms, the treatment is continued for seven days.

**Nasal Spray.** — William R. Warner & Co., Ltd., Eastleigh, Hants, announce the introduction of a new speciality, Biomydrin nasal spray. Biomydrin is described as a "complete" nasal spray, in that it exhibits decongestant, anti-



bacterial, anti-allergic and mucolytic agents in a single formulation. Exceptional penetration is claimed to be secured by the inclusion of thronzonium bromide, a new mucolytic compound. The pack is a plastic spray bottle containing  $\frac{1}{2}$  fl. oz.

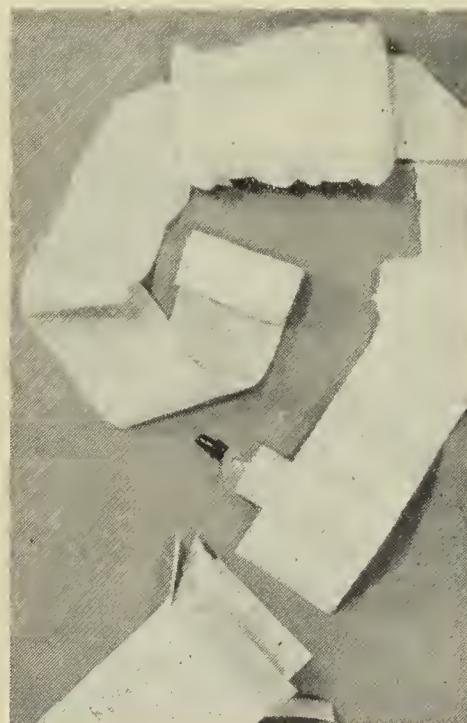
**Heat-resistant Chemicals.** — Albright & Wilson (Mfg.), Ltd., 1 Knightsbridge Green, London, S.W.1, announce that, as a result of the success of the initial stages of a research project into the nature and properties of phosphonitrilic chlorides, they have been able to separate on a commercial scale the trimer and tetramer from the crude mixture of cyclic and linear polymers. They are making available sample quantities of pure trimer and tetramer, and larger quantities are going to become available in the near future. Messrs. Albright claim to be the first chemical manufacturing company in the world to announce that they can separate the polymers on a commercial scale. The phosphonitrilic compounds have certain similarities to silicones, and the company are hopeful that a wide range of heat-resistant materials will come to be developed from them. A detailed booklet on the subject is available from the company's organic chemicals department.

**Influenza Virus Vaccine.** — Glaxo Laboratories, Ltd., Greenford, Middlesex, announce the introduction of Invirin polyvalent influenza virus vaccine, containing 20,000 haemagglutination units per mil (two parts A/Singapore/1/57; one part A/Nederland/36/56; and one part B/England/10/54). The prophylactic dose is one 1-mil injection. Invirin is claimed to provide protection against virus influenza, including the Asian type. The packs are a 1-mil ampoule and box of six 1-mil ampoules. Invirin must be stored in a refrigerator at 2-10° C., but is not

damaged by limited exposure during transit and use to temperatures up to 20° C. It replaces the earlier influenza virus A (Asian) vaccine, which is now discontinued.

**Prednisolone Preparations.** — Glaxo Laboratories, Ltd., Greenford, Middlesex, have added several products to their Predsol (prednisolone) range. All are weaker in strength than the original Predsol preparations, which continue to be available. The new products are a lotion containing 0·1 per cent. prednisolone phosphate in 20-mil plastic bottle and four ointments, Presol ointment numbers 1 (non-greasy) and 2 (greasy) containing 0·25 per cent. prednisolone phosphate and Predsol-N ointment numbers 1 (non-greasy) and 2 (greasy) containing 0·25 per cent. prednisolone phosphate and 0·5 per cent. neomycin sulphate. All the ointments are in 5-gm. and 15-gm. tubes. Messrs. Glaxo also announce the introduction of Prednelan-N intra-articular injection, containing 25 mgm. per mil of prednisolone (as acetate) and 0·5 per cent. of neomycin sulphate. The injection is available in box of six 1-mil ampoules and 5-mil multidose vial.

**An Emergency First-aid Dressing.** — Robert Whitelaw (Newcastle), Ltd., 44 Great North Road, Newcastle-on-Tyne, 2, are marketing an emergency dressing, Klintex, with cleansing fluid containing 1 per cent. cetrimide and 0·1 per cent. chlorhexidine diacetate. The purpose of the fluid is to enable wounds to be properly cleansed before bandaging when water is not readily available. They suggest that the dressing will have an appeal in many industrial undertakings (even those with modern ambulance rooms) and as a family first-aid pack. Its main advantage lies in the fact that the cleansing fluid is antiseptic, so that a wound dealt



with immediately is given a better chance to heal. The whole is supplied in a cardboard carton, with the actual dressing in a sterile paper cover. The carton is opened to reveal a paper flap that is pulled out to show a "pocket"

holding a plastic screw-topped bottle containing the cleansing fluid. The paper flap is lightly stitched to a short length of bandage which also has a "pocket," this time containing a pad of cotton wool, which may be used as a swab to clean the wound. The dressing is a cotton-wool pad covered by gauze and measuring 3 x 3 in.; it is similar to a standard No. 13 mines dressing. An ample length of bandage is attached to the pad.



"PERM" IN TUBE: Pack and display outer of Bliss, the new home "permanent" of Lambert Chemical Co., Ltd., Eastleigh, Hants (see C. & D., September 13, p. 269).

## TRADE NOTES

**Credits.**—Benger Laboratories, Ltd., Holmes Chapel, Cheshire, announce that credit is being given on all stocks of Notensil held at the close of business on September 30. Credit claims must be submitted in writing by Monday, October 13, stating wholesaler through whom credit is to be passed. Envelopes should be marked "Notensil."

**Redesigned.**—The shaver division of Remington Rand, Ltd., 26 Kensington High Street, London, W.8, announce improvements in the company's range of dry shaving accessories. The Remington pre-shave, after-shave and powder stick have been redesigned in the black and gold packages illustrated and changes have been made in the price structure.

**Shaver Incentive Scheme.**—Ronson Products, Ltd., 352 Strand, London, W.C.2, point out that under their "five point merchandising plan" (C. & D., September 13, p. 269) a free Ronson Super-trim shaver goes to any Ronson stockist ordering twelve shavers and who spends £6 10s. or more in local advertising, and not as previously stated. The incentive scheme is applicable only on orders placed direct.

**Launching Campaign Success.**—Bowater-Scott, Ltd., Bowater House, Knightsbridge, London, S.W.1, state that the reason the introductory composite cash bonus offer of Scottissue toilet rolls was withdrawn (see C. & D., September 20, p. 294) was that the product was so well received by wholesalers and retailers. Regular sup-

plies may be obtained in solid cases of either seventy-two single rolls or thirty-six double rolls from wholesalers or from the company's representatives.

**Expansion of Activities.**—Behind the move to Weston-super-Mare of Barber Electrical Services, Ltd. (see p. 327) is a policy of expansion. The move coincides with a decision to go into full-scale production of a wide range of electro-medical and industrial electronic equipment. A new laboratory at the Weston works will assist the research and development work of the associated Barber Medico-Electronic Laboratories, Ltd., and in the coming season an extensive advertising campaign for Barber health lamps and other products is being launched.

**Distribution Change.**—On October 1, Merrell-National (Laboratories), Ltd., 20 Savile Row, London, W.1, are taking over the sole distribution in the United Kingdom of the company's ethical products, Tace, Kolantyl, Merbentyl, Debendox, Frenquel and Meratran. For some time past those products have been promoted and distributed by Riker Laboratories, Ltd., Loughborough, Leics, and a separation of the two ranges has become necessary "in view of the significant increase in the number of new products coming from Messrs. Riker," coinciding with an increase in the number of products developed by Wm. S. Merrell Co., Cincinnati, Ohio, and its associated company, the National Drug Co., Philadelphia, Pa.



Also in the redesigned range is a pre-shave lotion in similar pack to the after-shave.

**Now Tax-free.**—Under a Purchase Tax Order that took effect on September 22, the anticholinergic drug Tral of ABBOTT LABORATORIES, LTD., 8 Baker Street, London, W.1, is exempted from purchase tax.—BAYER PRODUCTS, LTD., Neville House, Eden Street, Kingston-on-Thames, Surrey, announce that their speciality Panadol is exempted from tax under the same order.—Pfizer, Ltd. (United Kingdom representatives of C. H. Boehringer Sohn, Ingelheim-Rhine, Germany), announce that since September 22, Vascut tablets and drops have been exempt from purchase tax.—WEST PHARMACEUTICAL CO., LTD., 9 Palmeira Mansions, Hove, 3,

Sussex, announce that Tabalgin brand N-acetyl-p-aminophenol (Paracetamol) tablets are now free from purchase tax.—JOHN WYETH & BROTHER, LTD., Clifton House, Euston Road, London, N.W.1, state that both Equaprin and Gluferate tablets are now tax-free.—IMPERIAL CHEMICAL INDUSTRIES, LTD., Pharmaceuticals Division, Fulshaw Hall, Wilmslow, Ches, state that Tenormal (pempidine tartrate) tablets are now exempted from tax.

## Bonus Offers

IRISH MOSS MFG. CO., LTD., 421 Antrim Road, Belfast. Loughrey's syrup of Irish moss. Fourteen to doz. on 3-dozen lots. Thirteen to doz. on 1-2-dozen lots. Until October 31.

ERNEST JACKSON & CO., LTD., Crediton, Devon. Jackson's pastilles and lozenges. 1 doz. of any one kind free for each complete 12 doz. ordered of the company's eighteen varieties.

WARD, BLENKINSOP & CO., LTD., York House, 37 Queen Square, London, W.C.1. Gon chilblain tablets. Special offer for minimum order of two display outers giving 50 per cent. profit. Until November 1.

## MANUFACTURERS' ACTIVITIES

**Outing by Air to Jersey.**—The head office staff of D. & W. Gibbs, Ltd., Hesketh House, Portman Square, London, W.1, flew to Jersey on September 17 for their annual outing. On arrival in Jersey, the 180-strong party, headed by the chairman, Mr. J. D. Bisdee, O.B.E., D.F.C., had an official reception. Afterwards they dispersed to seek their own entertainment.

**Large Mailing to Doctors.**—An unusual campaign to advertise their antacid Aluphos is being conducted by Benger Laboratories, Ltd., Holmes Chapel, Cheshire. Approximately 28,000 doctors in Great Britain will receive two mailing shots, one the largest ever attempted by a pharmaceutical firm. A seemingly small pamphlet introducing "Mr. Average" Aluphos"—a typical business man, opens out stage by stage to a size of 60 x 21 in. His various attitudes are symptomatic of a peptic ulcer and treatment with an antacid is recommended. Doctors will also receive a sample roll of ten Aluphos tablets packed in a wedding cake box.

**Representatives' Conference.**—Mr. George Watson (general manager) opened the annual conference of representatives of The Crookes Laboratories, Ltd., held in London September 3-4, with a review of the previous financial year. Mr. J. R. Bowden (sales director) was in the chair and his opening address was followed by those of Mr. G. Garnett (supervisory representative), Mr. C. S. Ellis (the sales representatives' president for the year), Mr. F. Curzon (advertising manager), Dr. N. O. Eve who spoke on the clinical uses for corticotrophin and Mr. N. Taylor on "the commercial importance of piglet anaemia."

## INFORMATION WANTED

The Editor would appreciate information about the following:

Templar hypodermic needles  
Inactrin



**LONG SERVICE EMPLOYEES:** Forty of the forty-four employees of Burroughs Wellcome & Co. at the Wellcome Chemical Works, Dartford, Kent, who have the proud record of forty or more years' service.

## THIRTEEN CANDIDATES FOR SEVEN VACANCIES

### Pharmaceutical Society of Ireland holds a Council election

BY closing date, September 22, thirteen nominations had been received for seven vacancies on the Council of the Pharmaceutical Society of Ireland. Voting papers are being issued to all members of the Society, and must be returned to the Society's offices, 18 Shrewsbury Road, Ballsbridge, Dublin, by first post on Monday, October 6, at the latest.

The seven outgoing members of the Council are all offering themselves for re-election. They are Messrs. John Gleeson, Frederick J. Robinson, Cornelius J. Cremen, Philip A. Brady, Timothy B. O'Sullivan, Hugh P. Corrigan, and Vincent G. McElwee. Six of them reside in Dublin, and the seventh (Mr. McElwee) is from Dungloe, co. Donegal. The six new contestants are Messrs. Robert J. Semple, 6 Woodbine Park, Stillorgan Road, Dublin; Patrick J. Weir, Market Square, Mullingar, co. Westmeath; Michael C. Lohan, 2 St. Brendan's Road, Galway; Richard J. Power, Main Street, Newtownmountkennedy, co. Wicklow; John J. Staunton, Main Street, Castlebar, co. Mayo; John Kieran McGarry, 27 Dunville Avenue, Ranelagh, Dublin.

#### Outgoing Members

MR. HUGH P. CORRIGAN is the vice-president of the Society. Before election to that office he gave valuable service as treasurer (1951-57). His prudent and able management of the Society's finances has been the subject of many tributes at the annual meetings of the Society.

MR. JOHN GLEESON has a long record of service to the Society, not only as a member of Council for well over a quarter of a century but also as a man who has filled the highest offices of the Society with distinction. He was vice-president, 1940-42, and president, 1942-43. Subsequently he was treasurer (1946-51).

MR. FREDERICK J. ROBINSON (a director, Hayes, Conyngham & Robinson, Ltd.) comes of a family with a long

tradition in Irish pharmacy. His father, the late Sir Thomas Robinson, was president of the Society, 1938-40. Mr. F. J. Robinson is the immediate past-president of the Irish Drug Association.

MR. CORNELIUS J. CREMEN has been a member of the Council for over twenty-five years, and was vice-president, 1942-43, and president, 1943-45. He has shown particular interest in students' organisations.

MR. PHILIP A. BRADY is a Deputy of Dail Eireann and a member of the Dublin Corporation. He has been president of both the Pharmaceutical Society of Ireland and of the Irish Drug Association.

MR. T. BRENDAN O'SULLIVAN is a retail pharmacist. He was chairman of the catering committee for the British Pharmaceutical Conference held in Dublin three years ago, and is acknowledged to have done a first-class job of work in that capacity.

MR. VINCENT MC ELWEE is from the Republic's most northerly county, Donegal. Despite the arduous journey from Dungloe to Dublin, he has been a regular attender at Council meetings.

#### New Contestants

The six new candidates belong to the younger generation in Irish pharmacy. All have experience in either retail or hospital pharmacy, and have been associated with one or other of the newer pharmaceutical organisations formed in the past few years.

MR. JOHN KIERAN MCGARRY is secretary of the recently formed Dublin City and County Pharmacists' Association (formally launched at this year's Irish Drug Association's annual meeting). He is also secretary of the Social Club Foundation Committee, and had been a secretary and vice-captain of the Chemists' Gaelic Athletic Association Club.

MR. JOHN J. STAUNTON, who qualified in 1948, has had experience as official dispenser and compounder to

the hospital, county home and the clinics in the Castlebar area. In addition he has his own pharmacy in Castlebar.

MR. MICHAEL C. LOHAN has had twelve years' experience of hospital pharmacy since he qualified in 1940, and is in addition a proprietor-pharmacist with a business in Galway. He would like to see the present dispensary system abolished and pharmacists playing a much bigger part in the national health services.

MR. RICHARD J. POWER, who qualified twelve years ago, is particularly interested in advancing the status and scope of the retail pharmacist in rural areas, especially in relation to veterinary medicine. Before opening a business of his own in county Wicklow, Mr. Power was from 1945 to 1953 a representative of P. C. Cahill & Co., Ltd. He was a founder-member of the Chemists' Conference of the St. Vincent de Paul Society, and has been a member of the Chemists' G.A.A. team.

MR. PATRICK J. WEIR, who comes of a pharmaceutical family, qualified in 1951, and believes that pharmacists deserve "a much better deal" in relation to the Health Acts than they have received so far. The "bits and pieces" pharmacists have been given under the mother-and-child scheme, he says, in no way give pharmacists in the Republic their proper place in the country's health services.

MR. ROBERT J. SEMPLE is pharmacist to St. Ann's Skin and Cancer Hospital, Dublin, and has his own pharmacy at Woodbine Park, Stillorgan. He is chairman and one of the founders of the Hospital Pharmacists' Association. He also took a prominent part in organising the Society's recent post-graduate study courses. Mr. Semple would like to see in addition to a new Pharmacy Bill, the publication of an Irish national pharmacopœia, the introduction of a university degree in pharmacy, international recognition of the Irish qualification, and the holding

of an annual Irish Pharmaceutical Conference.

#### "Team" Policy

In a circular to members of the Society, the seven outgoing councillors, who are "campaigning" as a team say:—

"During the past few years the most vital matter engaging the attention of the Council has been the long-promised new Pharmacy Bill. We are happy to report that this measure has now reached the draft stage, and that during October representatives of the Council will be meeting representatives of the Department of Health to discuss the final draft before it goes to . . . preparation for the Dail. The ex-

perience we have had as members of Council over many years is freely at your disposal should you entrust us with the other members of Council to carry through the final negotiations. Concurrently with the new Pharmacy Bill we promise to give the Council our fullest support in urging upon the Minister for Health the need for the introduction of a new Poisons Bill, which inter alia, would repeal the existing 1908 Poisons and Pharmacy Act and lead to a general tightening up in the distribution of poisons."

The shortage of qualified staff has been a serious problem for many retail pharmacists during the past three years. We are happy to have been closely associated with the introduction

and creation by your Council of a Qualified Assistant category, which should ease this personnel shortage.

The constant encroachment upon the professional spheres of the pharmacist in recent times has been a subject of much concern to members of this panel. One of the several proposals to combat this has been the scheme put before Council of urging upon the Department of Health the abolition of the existing costly public dispensary system, and to substitute . . . the system followed so successfully in Switzerland, of having all dispensing and compounding under the Health Acts carried out by the existing pharmacies, giving the public the right to go to the pharmacist of their own choice."

## AMERICAN CHEMICAL SOCIETY

### Drugs among subjects at national meeting

NEW drugs and techniques were among the subjects of papers read by the 134th national meeting of the American Chemical Society, held in Chicago, September 8-11.

#### A Potent Oxidase Inhibitor

The compound 1-phenyl-2-propyl hydrazine, which is at present undergoing clinical trials, was referred to by Biel and Drukker (Lakeside Laboratories, Inc., Milwaukee, Wis.) in a paper dealing with the psycho-pharmacological group of drugs. In laboratory tests, they said, the drug shows a remarkably prolonged central stimulatory action. One disadvantage of most drugs currently used to combat depression was that their rapid destruction took place in the body. They tended to lose their effectiveness on repeated administration, and might have undesirable after-effects. The new compound was claimed to have a prolonged effect without the side effects. It differs from iproniazid, the first monoamine oxidase inhibitor discovered, by being twenty to thirty times more potent and by producing in addition a direct central stimulatory effect on the brain.

Two potential anti-leukæmia drugs, reported effective against several forms of cancer in animals, and possessed of low toxicity, were referred to by Kagan and others (the Upjohn Co., Kalamazoo, Mich.). The first, 5-bis(2'-chloroethyl)aminouracil, which is related to ribonucleic acid, is active in inhibiting established leukæmias and cancers in rats and mice without, it is understood, undue toxic action against normal tissue. Another compound, N,N-p-bis-(2-iodoethyl)amino benzyl-phosphonate, is active in inhibiting transplantable mouse and rat tumours with minimal toxic effects. Both compounds are of the nitrogen mustard group and chemically "tailored" to remove side effects. Both are orally active.

A paper was read by Mills and co-workers (Eli Lilly & Co., Indianapolis, Ind.), who were responsible for the discovery, of di-epoxybipiperidyl, which has prolonged the lives of leukæmic mice by 150 per cent. The compound is about ten times as effective against chronic mouse leukæmia as diepoxy-

piperazine, also synthesised at the Lilly laboratories three years ago. Unfortunately there are indications that the new drug may be more toxic though clinical trials show that it can temporarily improve the condition of chronic leukæmia patients. Clinical trials of the new compound are under way.

Wetherell, Jun., and others (University of Nebraska College of Medicine) reported on their investigation of compounds derived from chlorophyll. They expect better control of heart disease to result. Two classes of chlorophyll compounds, chlorins and rhodins, have proved of value in laboratory animals with induced heart failure. In the new work the differences between chlorophyll derivatives such as mesochlorins, porphyrins and vinyl porphyrins were examined. Those substances appeared to be relatively non-toxic and may supplement digitalis therapy, but are not yet ready for clinical trial.

#### Sulphonyl Hydrazones

Studies upon a new class of compounds called sulphonyl hydrazones were reported on by Zimmer and others (Chattem Chemicals, Chattanooga, Tennessee). Some members of the series appear from laboratory tests to be more effective against *staphylococcus* and *streptococcus* species than the sulphonamide compounds. The new drugs act in a different way from the sulphonamides and may kill bacteria which have developed sulphonamide resistance. The group includes members that have proved more powerful than sulphanilamide and sulphathiazine in tests against bacteria.

"The first instance of intestinal mucopolysaccharide biosynthesis by a cell-free system" was referred to by Varandani and others (University of Illinois) in examinations of mucus from vitamin A deficient rats, in which the incubation of mucus showed half as much mucopolysaccharide as normal animals. The experiments demonstrated a direct, presumably co-enzymatic function for vitamin A, and suggested that vitamin A may be necessary to control the speed of mucopolysaccharide formation.

Among papers without medical or

pharmaceutical implications presented at the Congress was one by Karler (Karler Laboratories, Berkeley, California) in which details were given of a new laboratory machine capable of removing salt and essential minerals from sea water. The machine, called a "spectrolator," separates mixtures by combined chemical and electrical methods. It splits up substances into component fractions much as a glass prism separates white light into its characteristic spectrum, according to the reader of the paper. A solution is fed in at the top and a continuous direct electrical current passes across the fluid as it runs down a filter paper curtain. The degree of separation is governed by the voltage and the speed of flow of the fluid. Each component builds up its own path and is collected in a pure state. If ocean water is processed, the yield would be pure water at a central drip point with negative and positive ions on either side. With greater separation, pure water is collected at the centre, sodium calcium and magnesium hydroxides are collected on one side, and chlorine and bromine gases and certain acids on the other. It is possible with salt water to extract many minerals. By the same method, hormones, antibiotics and enzymes of improved purity have been produced on a pilot-plant scale, and the instrument is now being developed to full-scale industrial production. It is hoped that the new equipment will permit a multiple vaccine to be produced that gives immunisation against most communicable diseases and free from side reactions. The invention would assist the conversion from batch processing of ethical drugs to continuous flow methods, with the assurance of quality control.

The chemical constituents of certain aromas and flavours was the subject of a paper by Mackay and others (Evans Research and Development Corporation, New York). Schultz, Jun., and Linden (Institute of Gas Technology, Chicago) described a method of converting shale into high quality fuel gas. The method, called hydrogasification, produces gas with a heating value of 800 British thermal units per cu. ft. economically.

## INTERNATIONAL PHARMACEUTICAL FEDERATION

Continued from THE CHEMIST AND DRUGGIST, September 20, p. 291

# Practical Pharmacy Throughout the World

## PAPERS READ TO RETAIL SECTION AT BRUSSELS

ONE of the most important reports submitted to the members of the Congress was that prepared by the *Commission de l'Exercice de la Pharmacie d'Officine*, which basically consisted of a number of reports on various aspects of practical pharmacy throughout the world. That by MR. LESURE indicated that the evolution of pharmacy had been dominated by three facts: the development of science and technology, industrial and commercial development, and the development of the social organisation of public health. The scientific problems which the pharmacist formerly had to solve were relatively simple and could be answered by himself. He could encompass the entire horizon of pharmaceutical knowledge, taking part in research in his individual laboratory whilst continuing his professional work for those who were ill. Now, because of the evolution of science, it was necessary for pharmacists to become specialised; they had often to work on a co-operative team basis. Techniques now being used had no relation to former ones, often involving material resources which were beyond an individual pharmacist. Economically speaking the trend was identical. Now raw materials were produced in factories, pharmacists still put together the various ingredients in order to give them to the patient in a form he could readily absorb, but in most countries they provided a finished product which they had bought and sold in the same condition. There had also been a major social upheaval, and health, which was formerly individual, had become collective. It had become a public phenomenon which must be organised and controlled down to the last minute detail. In some cases the insured person had become a compulsory servant of organisations for community protection, and pharmacists in many countries were faced with a single buyer who wanted to determine his price, his methods and his terms of payment. Unfortunately, the wishes of the patient were often subordinated to the wishes of the paymaster, and the patient himself might well disappear from pharmacies as an individual in pain.

### Commission's First Tasks

In the midst of that major upheaval the Federation wished to know what was happening to the dispensing pharmacists and therefore it had set up in London four years ago a Commission on the practice of dispensing pharmacy. That began by preparing a review of the task in hand. The first difficulty encountered was that of finding a common denominator for pharmacy in every country. Originally one of the major aims had been the study of the relationship of pharmacists as a group to the social welfare organisations. Formerly the freedom of economic re-

lations between the patient and pharmacist was limited only by the traditional, ethical obligation of doing the job correctly for the patient's welfare. However, the third participant, the social welfare organisation entrusted with the collective protection of the sick as well as paying the bill in some instances, established its own organisations to undertake the necessary care and that had become a constant and inevitable threat to the pharmacists' technical, ethical and financial independence.

### Pharmacist as Compounder

MR. S. E. BJORN's paper was entitled "Reflections on the Protection of the Pharmacist as a Compounder of Medicines." In it he tried to show the different trends of dispensing in various countries. He noted that, whereas industrialisation of chemical production had gone forward on a virtually similar basis in every country, international differences had arisen with respect to the industrial production of medicines. In the Anglo-Saxon countries, the Netherlands and Switzerland, pharmacies had virtually ceased to produce medicines, while in other countries, thanks to the pharmacists' associations, individual pharmacies had been able to maintain a greater or lesser share in the production of medicines. In those countries there was strong governmental control of pharmacies. In Denmark, Norway and Sweden no pharmacy could be closed or opened without State action. The person in charge of the pharmacy was designated by the Government but ran it at his own expense and risk and his income was limited through fixed prices for all medicines and special taxes on the turnover. He noted in Denmark there was one pharmacy for approximately 12,300 people, whereas in England and Scotland the figure was one for every 3,300 inhabitants. Where pharmacies were freely operated without Government control there was a trend in favour of chain stores, where management had no ethical or financial interest in having products prepared in its pharmacies but merely wished to make sure that they functioned as profitably as possible.

In Denmark all pharmacies had all equipment and apparatus necessary for the complete production of preparations. All pharmacies made all pills and indeed made all medicines sold (apart from "patent" medicines) and a third of all the pharmacies prepared infusions and liquids. The total number of prescriptions handed to the country's pharmacies in 1955 was 18,955 millions and of those about 10,109 millions were prepared by pharmacies and the remainder by industry.

In Sweden ordinary pharmacies were compelled to buy their finished and semi-finished preparations from the re-

gional pharmacy of the area. That centralisation of production among a small number of pharmacies had been made possible by the fact that the Association of Swedish Pharmacists controlled both production and investment and received strong Government support.

In Norway each pharmacist represented a production unit. However the Government was now taking over all wholesale activities pertaining to medicines and their necessary raw materials. Thus, the State would be in a position to control completely all medicines manufactured by pharmacists or by national or foreign factories.

It was well known in almost every country that medicines which were produced in accordance with pharmacopœias or similar compendiums were generally cheaper than identical proprietary medicines. So far as he could see it was a fact that the average level of prices of medicines in Scandinavia was lower than in other countries. He also made the point that there were military advantages to a government in having scattered production units rather than large factories which could easily be immobilised.

Dealing with the training of the pharmacist he referred to the fact that if there were no production of medicines in the pharmacy the analytical and pharmaceutical knowledge which a pharmacist had obtained whilst qualifying would usually be forgotten after a few years, but pharmacists who worked in the chemical and pharmaceutical industry had to keep up and increase their knowledge. That situation could result in two kinds of pharmacists, which would be harmful to the good name of the craft. If pharmacists could not show obvious reasons for justifying a university training by making use of their professional and scientific knowledge in their pharmacies the division of pharmacy into practical and scientific pharmacy would become automatic.

### Safeguarding Quality

MR. HARDY, Belgium, reported on "The Protection of the Quality of the Medicine Supplies from the Dispensing Pharmacy" and stressed that the quality of medicines was in no way comparable to "quality" in other fields. The fundamental factor which governed quality was that of effectiveness, which could only be achieved if the patient were given medicines which suited him. That condition demanded the prescriber's freedom to choose adequate medicines presented in appropriate forms for the patient, and it was therefore impossible to limit therapeutic resources to single forms of medicine as some people claimed. Other factors, without which medicines could not achieve real quality, stemmed from scientific research, special modes of

operation, the utilisation of products of great purity, and the quest for consistency. Those factors tended to disappear when lists of prescribable medicines were established on the basis of one criterion—the lowest prices of their ingredients. If financial value constituted one of the factors which determined the quality of medicines, it was a factor of secondary importance. A "fair" price could seem to be an asset to the user, but it must not, in the final analysis, impair his health.

In a report "The Repercussions of the Control by 'Sécurité Sociale' over Pharmacies and the Consequences deriving from It," DR. HANS MEYER stated that the increase in the consumption of pharmaceutical products which had occurred in every country had had the consequence that Mutual Insurance Societies, by virtue of being large scale purchasers, had demanded from pharmacists special prices or reductions on the current prices of phar-

maceutical products. He feared that that policy would extend so far as to deny the pharmacist a fair financial return, and might even result in the Societies themselves opening distribution centres for pharmaceutical products. To avoid that it was essential to have pharmaceutical representatives on the staffs of the government departments to ensure their voice being heard in decisions about pharmaceutical preparations.

"A fact universally accepted is that relations between human beings, be they individuals or corporate bodies, must be governed by a moral code," said MR. FRANK ARNAL at the beginning of his paper. Pharmacists had a social mission, a real public service to ensure which most certainly could not be left to individual inspirations, and it was proposed that the members of the International Pharmaceutical Federation should adopt a code of deontology. Mr. Arnal continued: "Deontology, the science of duty and ethics,

is concerned with a category of individuals and communities involving special problems. It must be expressed by a series of rules which are both sufficiently general in character to cover the complete field of application of all the relations of the group and also sufficiently detailed to provide the required factors for solving any circumstantial problems." The deontology code was a professional, moral or ethical code describing the duties of the profession to the community and persons outside the profession. It must respect different nations' legislation and sovereign rights and its rules could be divided into two categories—those provided by law or official regulations and which were rather exclusive to the pharmaceutical profession or derived from commercial or industrial obligations binding upon the pharmacist, and those deriving from the natural law. "These are eternal as they only depend on conscience."

## Pharmacists' Responsibility under Law

### DISCUSSIONS AT HOSPITAL SECTION

THE hospital pharmacist's responsibility for accidents arising from errors in the pharmacy was the subject of a number of papers presented by various authors from different countries at the hospital pharmacy section.

MR. J. A. MYERS, B.Pharm. (chief pharmacist, Royal Infirmary, Edinburgh), jointly with MR. C. C. STEVENS, LL.B., M.P.S., reported on the situation in England. They dealt with the pharmacist's position under common law, poisons law, and the Dangerous Drugs Act. After pointing out that, as an employer, the hospital authority may also be responsible if the pharmacist was negligent, they dealt with the legal interpretation of "negligent," indicating that the courts expected pharmacists to exercise reasonable professional skill in carrying out their duties. It was incumbent upon those responsible for day-to-day working in the dispensary to ensure they had competent staff, efficiently supervised, and safe plant. They had to see that common-sense precautions were taken whilst working. The authors also referred to the pharmacist's responsibilities for Customs and Excise matters.

#### Conditions in France

DR. JEAN DORCHE (*pharmacien de l'hôpital*, Croix Rousse, Lyon), presented a paper concerning the conditions in France, where the pharmacist's responsibilities were (a) penal and disciplinary, and (b) civil. The former were judged by a court of common law and the fact that the pharmacist had received orders from his administrative authority would not be a valid excuse in such matters as allowing medicines to be prepared by an unqualified person. Those faults under penal law were always strict and formal and penal responsibility was always personal. For example, in 1950 a hospital pharmacist was imprisoned for a month and fined 50,000 francs because he received tartaric acid in place of glucose and gave

it out in 125-gm. packets to patients in insulin coma, two of whom died. Civil responsibility was based on the code which stated: "Every act whatsoever which causes harm to another demands that he by whose fault it occurred shall make it good." Certain responsibilities of the pharmacist for personnel in the pharmacy were provided for in the poisons rules but generally the pharmacist was not personally responsible for the faults of his assistants—those were the responsibility of the administration.

#### North American Problems

DR. GEORGE F. ARCHAMBAULT (chief of the pharmacy branch, Public Health Services, U.S.A.) said that in the United States the hospital pharmacist was liable for his own acts of negligence and for the acts of those under his supervision. His administrator and hospital might tell the pharmacist where and when to practise his profession but never how, and to avoid liability towards his hospital and himself the pharmacist must refuse to do certain acts or refuse to allow them to be done by his staff when he knew the acts were not proper or legal to his profession.

MISS PAULE BENFANTE (*Pharmacien-chef*, Hôpital de Notre-Dame, Quebec) in her paper declared that the problem, difficult in any country, was even more so in Canada, because the ten provinces each had its own civil legislature. In nine of them it was derived from English common law and in Quebec from the French civil law. Federal laws controlled the practice of pharmacy generally, including hospital pharmacy, and there were acts governing the use of narcotic drugs and the Food and Drugs Act.

A report on Austria stated that pharmaceutical practice was governed by laws which covered every aspect of the profession. They included professional practice, which laid down details of space, stocks, labelling, etc., and very

severe penalties were inflicted for severe breaches of the Dangerous Drugs laws. A pharmacist who was guilty of endangering the life of a patient by negligence might be subject to a fine or imprisonment of from one to six months or if the patient died from six to twelve months. If the error were due to lack of knowledge the court might prohibit the pharmacist from practising until he had again passed his examination either wholly or in part. Under common law patients could sue "negligent" pharmacists.

DR. H. LEHMAN (chief pharmacist, Burghspital, Basle) referring to the Swiss regulations, distinguished between criminal and civil responsibilities. Under the former the pharmacist was punishable if he brought about the death or injury to the health of a third party. If damage were caused by the negligence of several persons each of them was punishable. The chief pharmacist of a hospital was just as responsible as if he had committed the error himself when he had not taken sufficient measures of security.

#### Swiss Cantonal Anomalies

Concerning civil responsibility the requirements were not uniform throughout Switzerland. Certain cantons were not responsible for the faults of the employees in their hospitals. The section had before it a short note on the regulations in Sweden which referred to the prevention of accidents during the use of medicines in hospitals; they covered the labelling, stocking and distribution of medicines.

Spanish pharmacists in hospitals had to comply with the same regulations as those which control retail pharmacy, and there were apparently no special regulations concerning hospital pharmacy.

MR. PAUL HUBLET, Brussels, believed that a pharmacist belonged to a liberal profession whether he practised in a laboratory, shop or hospital, and he

must always satisfy his professional conscience as well as carry out the requirements of the law, both civil and penal. Legislation made it clear that the pharmacist was responsible for the quality of the goods he supplied.

MR. C. C. STEVENS, Great Britain, then gave a summarised review of the legislation. He said the countries which had been discussed could be divided into three groups:—Those having a legal system derived from Anglo-Saxon common law (United Kingdom, except Scotland; Canada, except Quebec; the United States, except Louisiana; Australia, New Zealand, parts of Africa, the Republic of Ireland and to a great extent, the Commonwealth); Group two were those based on Roman civil law or the Napoleonic code, and those included much of Europe and Central and South America. Group three were those which could not be classified into the other groups and embraced Scandinavia and Germany. Many of the differences in legislation arose from a different approach to the control of the profession. Whereas under the civil law systems the tendency had been to give pharmacy a professional standing over a number of years and control it by legislation as a liberal profession, in the common law countries the protection of pharmacy had grown as a subsidiary to the control of toxic and dangerous drugs.

There were only two responsibilities common to all countries. The responsibility for the control of Dangerous Drugs which was common because it was based on World Health Organisation regulations. All pharmacists in all countries were also responsible under their criminal code for wilful acts or negligent omissions, but in that case there was no difference between the position of the hospital pharmacist and other members of the community. With the possible exception of some Canadian provinces all the countries which had been discussed subjected their pharmacists to disciplinary control under their professional bodies. MR. STEVENS pointed out the difference between the Republic of Ireland and the United Kingdom where the older legislation in the former did not subject the pharmacist to professional disciplinary control whereas in the United Kingdom that was so under the 1933 Pharmacy Act. A responsibility existed for negligence but the position of the hospital and the pharmacist as joint tortfeasors varied between the different countries, and it should be noted there was special pharmaceutical legislation covering the conduct of hospital pharmacists in Austria, United Kingdom, Belgium, France, Quebec and some cantons of Switzerland.

#### "Is Inspection Desirable?"

Inspection of hospital pharmacists took place in Spain, Austria and France and it was always a debatable point whether such inspection was desirable. In Mr. Stevens' opinion inspection of hospital pharmacists was good not because it suggested the authorities considered the hospital pharmacist must be policed but because it made for co-operation between the governing body and the hospital pharmacist and did show to the lay administrator in the hospital that the



Officers of the hospital pharmacists' section at the International Pharmaceutical Federation Congress. Left to right: Mr. H. Lehman, Switzerland (vice-president); Professor Cheymol, France (president); Mr. H. S. Grainger, Great Britain (secretary); Dr. Don E. Franke, United States of America (vice-president).

pharmacist had professional responsibilities apart from the employer-employee relationship.

As a lawyer he thought that regardless of whether the law held the individual pharmacist or the hospital responsible for negligence it was a wise protection for the pharmacist to secure insurance, preferably through a professional association. In Austria no dispensing by auxiliaries was allowed but from his experience he thought that it was probably impossible under present economic conditions for a pharmacist to do all the work of his department but he considered that provided the supervision was adequate the employment of auxiliaries was justified. Mr. Stevens drew attention to the fact that re-

sponsibility and privilege went together and said "if you insist on the privileges and rights of a qualified pharmacist in hospital work with a decided place in the community you must be prepared to accept full responsibility for your acts and not try to avoid them or pass them on to other persons." He suggested there was a vast field for the study and preparation of documentation aiming at what was desirable and what was attainable in legislation affecting hospital pharmacy. He recommended that the section should give the subject a systematic study and prepare recommendations that would be of benefit to hospital pharmacy, pharmacy as a profession and the community they served.

## Control and Registration PHARMACISTS-IN-INDUSTRY SECTION

AT the open meeting of the pharmacists in industry section on September 11, the president of the section, MR. C. W. ROBINSON, Great Britain, introduced a report on the control and registration of specialities that had been prepared by a subcommittee consisting of O. GAUDIN, France, E. LANG, Switzerland, N. STEIN, Denmark, and C. C. STEVENS, Great Britain. THE PRESIDENT in his introductory remarks emphasised that the subcommittee's mandate was only concerned with the application of registration where it existed. It was not to consider the principle of control and the section did not wish the report to be regarded as an intimation to countries that had no statutory system of registration to introduce one. The report indicated that the subcommittee prepared a preliminary survey of the main requirements for registration already existing in forty-three countries, and although some of the information was not quite up-to-date it did reveal certain points concerning the information which was requested by the various authorities. An analysis of that information indi-

cated that 55 per cent. of the authorities requested chemical composition and pharmaceutical formula; 91 per cent. wanted indications of use; 84 per cent. dosages and precautions; 61 per cent. details of authority or power of attorney; 90 per cent. required samples; 84 per cent. wanted publicity and leaflet details; 75 per cent. demanded specimens of labels; 71 per cent. requested confirmation that the product was on sale elsewhere, and 60 per cent. wanted analytical data. There were a number of countries that requested items for which they were the only requesting country or which only one or two countries deemed necessary. Those items were:—Details of inventor; cost details; trade mark information; information of similar preparations already on sale; details of inactive ingredients and raw materials; statement on whether local manufacture possible (for imported materials). The subcommittee after studying the existing requirements discussed what information and material could fairly and reasonably be requested by a control bureau from a manufacturer in

order to realise what must be the real aim of control—protection of the public, preservation of the status of pharmacy, and the reputation of the pharmacist engaged in industry. After discussing the items in detail the committee considered that much of the information which had to be presented by a manufacturer could be set out in one suitable document. The committee therefore suggested that the International Pharmaceutical Federation should attempt to ensure the adoption of the proposed standard document by all countries and that it should contain the following information in the order given:—Qualitative and quantitative composition, methods of analysis, physico-chemical constants (for new substances), the field of indications and dosage, details of toxicity, contents of each package size, and the type of publicity proposed.

MR. STEVENS, putting forward the point of view of the subcommittee, stated that control of medical specialities was only justified if it was for the protection of the public. It should not be used for discrimination against goods from a certain country or manufacturer, nor as a source of revenue. Concerning requests by authorities for a certificate of origin he said there were conflicting views as to whether that was necessary but . . . there was a strong feeling against the type of manufacturer who tried to exploit people in under-developed countries by manufacturing and advertising products that he would not sell in his own country. He considered that speed should be the essence of approval under any control system. Anything that held up the making available to the public of a new and valuable medicine was bad and control bodies should reach their decisions on approval within a short and reasonable time. The subcommittee believed it would help all concerned if the standard form, naturally in the appropriate language, could be adopted by all control authorities. Mr. Stevens continued "variety means delay and expense and I would say to those responsible for control that the more expensive you make control the more you lay on the public. Whatever control is exercised has to be paid for." During the discussion MR. R. CHIVOT, France, noted that Great Britain was not included in the countries in which registration was required and MR. ROBINSON then said that in Great Britain there was a control in so far as the Pharmacy and Medicines Act required a declaration of composition on every preparation which was recommended for use as a medicine. The next safeguard so far as prescriptions was concerned was the committee under the National Health Service which classified all pharmaceutical prescription specialities into six different categories. DR. H. DAVIS, Great Britain, said one thing often not understood outside Great Britain was that there were various forms of control of quality which did not appear under legislation precisely directed to pharmaceutical specialities. Under N.H.S. there was a drug testing scheme which meant that at any time a speciality which had been on the market could be taken and analysed. That was a

powerful deterrent against a manufacturer putting on a spurious product. In addition to the liability to test for quality under the drug testing scheme, the United Kingdom also had a Food and Drugs Act and regulations which also could be invoked to analyse from time to time any product on the British market. He did not believe that it was necessary to carry out analysis of practically every batch issued by the manufacturers. There was too much of that. In many cases those who were going to analyse some of the products did not know how to do so until the manufacturer informed them. He continued "I find myself frequently having to defend our British system and as I look through the requirements of practically every country in the world I do not feel you get any better protection than we do in our country without all those details." On the question of the definition of protection of the public, Dr. Davis stated the Ministry liked to think they were protecting the public from excessive taxation and they had to make sure that the Health Service was not being exploited by being forced to buy specialities whose cost

bore little resemblance to the intrinsic value of that material. He also stated that there were possibilities of mistakes if there were too many products on the market which were almost identical in composition but differing significantly in name and in costs. He thought the time would come when every country would find there was a limit to the multiplicity of preparations which were making the whole question of prescribing and pricing of prescriptions chaotic and some control would be necessary. DR. H. POWER, United States, commenting on Dr. Davis' remarks on the duplication of products stated that they had the same problem in his country, and suggested that perhaps it was a good thing from the standpoint that duplication meant competition and competition foreshadowed monopoly. It enabled manufacturers to develop new products and new ideas and kept the market very competitive and the prices reduced. Although there was some confusion with the duplication of products the public was getting the benefit of improved products and products at reduced prices.

## Correspondence

Letters when received must bear the name and address of the sender, not necessarily for publication. The Editor does not hold himself responsible for the views expressed.

### Leeches and Jars

SIR.—I read with interest under the heading "Echoes of the Past" a recent paragraph on the subject of leeches (*C. & D.*, August 30, p. 219). When reading those snippets one wonders how people survived in days gone by—or did they? On the subject of leeches I saw in the shop of one Thomas Bell, of Ambleside in the Lake District, a perfect specimen of a jar or bowl used to contain leeches. It was in white porcelain, inscribed in deep blue lettering, and the owner said it was probably one of the few specimens now in existence that was absolutely undamaged. In the same shop there were a number of brown glass jars each with stopper surmounted by a long glass spike.

R. H. JOHNSON,  
London, E.C.3

### Christmas Buying

SIR.—We are now being besieged by the representatives of manufacturers wishing to stock our pharmacy with their special Christmas lines. When purchase tax was reduced in the Budget this year, millions of pounds were lost overnight by retailers, and it is probable that £200 to £300 represents the average loss of the smaller retail chemists. One firm, and one firm only, so far as I know, made a generous gesture and shared part of that loss. In all other cases the loss was born 100 per cent. by the retailer. Approaches to Members of Parliament, both direct and through organised bodies, produced no offer of any relief and we have been warned that further grievous losses to retailers are proposed in the not too distant future. In the circumstances, it would appear that retailers will, this Christmas, take evasive action by cutting

down to one-half or one-third their normal Christmas buying to be quite sure that they have no left overs to meet further tax losses. Alternatively, perhaps an undertaking might be demanded from the manufacturers that any tax loss will be made good. Failing some action on the part of the manufacturers or the Government, it would appear unlikely that the usual wide selection of taxed gift merchandise will be available in retail shops this Christmas.

STANLEY BUBB,  
Bournemouth

### "Chip" Boxes

SIR.—We have read with pleasure your interesting article (*C. & D.*, August 9, p. 149) referring to the use of boxes made of wood shavings for dispensing pills and tablets. In Peru that type of container is still used, owing to their cheapness. They are used by all chemists and druggists for small quantities of ointments, pills, etc. Of course, the sale of those products has as compared with previous years, dropped tremendously, mainly for the reason that it has been replaced by the sale of pharmaceutical specialities. We often asked ourselves whether the container made of wood shavings which is so much used in our country has also been used in other countries, and today, through the publication in your journal, we see that the use of this type of case has declined in countries in Europe. Before ending this letter, we wish to congratulate you on the very interesting articles you publish in your review, which we find most useful in our country.

DROGUERIA KAHAN, S.A.,  
ADRIAN KAHAN M., Manager,  
Lima, Peru



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Published weekly at  
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TELEGRAMS: "CHEMICUS ESTRAND, LONDON"

## "More Heat than Light"

THE professional sessions of the British Pharmaceutical Conference should, as the president of the Society (Mr. D. W. Hudson) pointed out from the chair last week, be "objective"—like, presumably, the science sessions. It is true that the science sessions themselves sometimes fall short of complete objectivity, but never, so far as we can recall, have they become quite so "subjective" as was the second professional session (September 19). The topic under discussion was the vexed one how proprietary medicines should be dispensed, but the "vexation" need not have taken so personal a turn as it did, engendering, as one speaker put it, "more heat than light."

Opening shots in the debate were really fired at the 1955 Conference, in a discussion on proprietary medicines at which three papers were presented. Since then the debate has made little progress, and matters were not much helped on Friday last when speakers with nothing constructive to say stepped up to the microphone to reminisce on the dispensing practices current in their youth. Those practices were both known to all and irrelevant to present-day conditions.

There are those who go so far as to declare the whole of Friday's debate to have been a waste of time. We do not think so. There was never any question of a vote being taken at the session for or against a particular method, with binding effect on the profession henceforth. If the debate has shown that any large measure of agreement is still a long way ahead, nevertheless it has brought into the light of day some of the principal arguments for and against using manufacturers' original packs and labels unchanged, as is apparently done on the Continent.

Mr. Chamings, in "sticking his neck out" as he did, performed a salutary if unpopular service. Mr. David, whose thoughtful paper provoked less attack, nevertheless challenged the professional conscience with criticisms in particular of one current practice. He made other points that will bear reflective study. The suggestion of a joint committee of manufacturers and retailers to discuss the problem found support, but the secretary of the Association of British Pharmaceutical Industry (Mr. A. Duckworth) pointed out that already there is at least one committee in existence to study the problem. As we see it the next steps must come from those committees. Let them examine the arguments presented and views expressed at Llandudno, form their own conclusions, and then come forward with

their recommendations with, as Mr. Duckworth suggested, their full reasons for making them. Then, after an interval for study within the profession, the subject may again be discussed at a professional session, with better hope of an agreed principle being arrived at.

## Ideas in Ferment

DRAMA is an element rare in the science sessions of the British Pharmaceutical Conference, which usually go their purposeful way placidly enough. That it should emerge at the final session and at the very last paper must be unique.

It did present itself in just that way this year. As the Conference chairman called upon the reader of the last paper to take the rostrum, a blackboard was lifted into position upon an easel at the back of the platform. That was against all the rules, and the chairman was overheard to ask one of the general secretaries: "Do we allow that?" The secretary's answer was private, but as a result of it the chairman announced that the author had prevailed upon the general secretaries to allow the blackboard, "as otherwise my remarks will not be possible." That was not the only way in which established practice was flouted, for neither the paper nor a summary of it was presented. Instead, Dr. Mathieson proceeded to "take the paper as read." In place of the paper he read from a typescript a paragraph of explanatory notes on points dealt with in it. Had the author's contribution been timed earlier in the sessions it is possible he might not have been able to get away with it. The chairman might have insisted that his ruling that only text already accepted by the selection committee should be permitted to be read, and the ban on blackboard demonstrations enforced. In the event they were both allowed, and a precedent has thus been created. Indeed the precedent of reading material contained neither in the circulated text nor in the summary had already been broken in the symposium session by Dr. Rose and Dr. Goodwin, and nobody who was present could fail to admit that their departure from protocol was as valuable as it was acceptable.

We read into the tension that momentarily intervened on September 19 a good deal more than a mere "incident." Its symbolic importance should not be dismissed because Dr. Mathieson hardly took the trouble, it would appear, to be polite to his chairman or some of his questioners.

Dr. Beckett pointed out the most significant feature of the investigation that was described in the paper. It was that the conclusions were not the result only of observation and experiment. "Logical theoretical reasoning along modern lines" had postulated the existence of a third product related in chemical structure to two known natural compounds. Like certain heavenly bodies and elements in the periodic series, its existence had first been conjectured and subsequently discovered or made. [In this case by identification of the compound in an overseas laboratory and independently of the author's researches.] Dr. Beckett also pointed out that Dr. Mathieson's work was a proof that the pharmacy schools were coming back into their own in investigations into chemical structure.

The organism that survives is the one that best adapts itself to changing circumstances, and we see other signs that the Conference is undergoing an evolutionary metamorphosis. The placing of a two-year limit on the

term of office of members of the Conference Executive means that a wider circle of research workers is being and will be drawn upon. It is certain that the average age of Executive members will become (and tend to remain) lower, and that new ideas will come knocking at the door. One of them might well be a "demonstration session."

There has also taken place this year a larger-than-usual change among the Conference officers. Mr. Treves Brown has taken the now well charted path to the chair via the treasurership. Mr. Rolfe takes over as treasurer, and Dr. Hersant advances in seniority. Dr. Train, who is the new secretary, may be taken to represent the new generation in pharmaceutical science. A safeguard against a "clean sweep" is that outgoing chairmen are retained as vice-chairmen. It may be that that is even overdone, for there are now 16 vice-chairmen against six elected members. Fortunately they resemble the House of Lords in that they do not all turn up at each meeting of the Executive. Nevertheless the two-year limit might advantageously, perhaps, be applied to the vice-chairmen, so that too many older statesmen may not impede the process of adaptation that is the best guarantee of continued life, vigour and fruitfulness for the Conference science sessions.

## Onward from Galen

### A CURRENT CAUSERIE

BACK from Llandudno on Sunday I was relaxing and reading my paper (with rather less concentration than I had to give to some of the science papers), when I was halted by the following paragraph in a report:—

The microphones did not work. The president . . . tried leaning forward and then back: "I'm a foot too tall for the thing," he said in pathetic bewilderment.

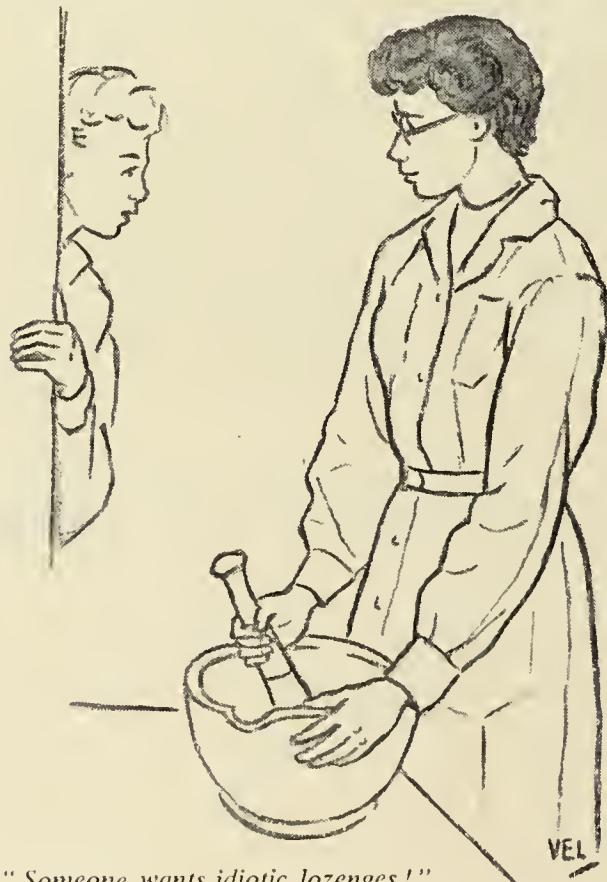
The paragraph has confirmed me in a belief I have long held that British microphones are currently the victims of a very prevalent disease. My view is that it is a virus disease akin to one of the leaf mosaics that attack certain plants. It is not possible from the auditorium to detect whether a microphone is infected or not, though it is soon revealed when the speaker opens his mouth, and I therefore take the infection to reside in the mouthpiece. The mosaic patches must vary widely in size, from a quite small one that causes an occasional splutter to total coverage resulting in complete silence. At Llandudno I had a little opportunity to make a closer study of the disease. I found that the speakers, unlike audiences, were at once aware of the infection. Some, like a healthy hen confronted by a sick sister in the hen run, would sweep the thing aside. "Can you all hear me without the microphone?" they would call, and hearers in the body of the hall who had had experience of the loathsome thing would respond "Yes" in sympathy, forgetting that as soon as he got well started the speaker would allow his voice to fall. Other speakers, aware that they were fully expected to use the mike, would turn their head to one side to avoid watching the dread buboes. An unexpected finding but one for which I have had the corroboration of other observers was that each such speaker turned his head away from the audience and towards the author of the paper. For a time I was at a loss to account for the curious uniformity of that behaviour. Then it occurred to me that it must betoken considerateness lest anything unpleasant should be wafted towards their audience (the platform being assumed immune). A totally different microphone user was the dare-you-to-do-your-worst type. The technique here was to put one's mouth right up to the mouthpiece and shout into it. That shook the instrument and forced from it a vibratory noise that was some sort of substitute for the spoken voice. The advant-

age of this method was that it so astonished the audience that by the time they came back to normal it was too late to criticise, because another speaker was reading the next paper. From field observations I infer that the microphone disease virus exists in two varieties. In open air situations the volume of the sound signal seems unaffected, though the clarity is often ten-tenths lost. The hypothesis that a volatile element in the virus dissipates when not confined indoors is, I consider, incompatible with the knowledge that hot air is usually present in just as measurable quantities in the lecture room as at the railway station. Further investigations into the disease and its causes are proceeding, as I feel it is important to try and locate virus-free or virus-immune microphones in time for the Bournemouth Conference meeting next year.



PROMPTED apparently by reports of the appearance in gardens and allotments of an unusual plant said to resemble a plant "from Mars or outer space," Miss Mary B. Hyde, M.Sc., Slough, contributes a descriptive article on the thorn-apple to the *Mid-Thames Naturalist*, the annual report for 1957 (published 1958) of the Middle-Thames Natural History Society. Rare in Britain, the thorn-apple is an alien importation, though it has existed in the island since about 1600 A.D., when Gerard (of "Herball" fame) received some seeds of it from Constantinople and "dispersed" them "through this land, whereof at this present I have great use in Surgery." Isolated plants occurring today may be the descendants of Gerard's "dispersal" for the seeds remain alive and germinate after several years. But as stramonium is also grown in "physic" gardens they may, on the other hand, be garden escapes. An illustration in the publication shows growing plants of the thorn-apple being examined by botanists. In the Mid-Thames Society's area they were reported during 1957 at Wendover, Great Missenden, Langley and Slough. The author of the article acknowledges help from Mr. G. T. Nelson, M.P.S., 44 Marlborough Road, Slough, in the provision of information on the pharmacology of the thorn-apple, and from Parke, Davis & Co., Ltd., Hounslow, in the supply of the photograph.

### CARTOON WITHOUT COMMENT



"Someone wants idiotic lozenges!"

## BRITISH PHARMACEUTICAL CONFERENCE, LLANDUDNO, 1958

## SECOND PROFESSIONAL SESSION

## The presentation of dispensed medicines

THE professional session of the Conference meeting was resumed on Friday morning, when another subject came up for discussion. Like the first, it was introduced by two speakers. First came:—

## Views of a Practising Pharmacist

G. T. M. DAVID

FROM the point of view of the pharmacist in retail practice this subject may be considered under the headings: dispensed non-proprietary and dispensed proprietary medicines. For the first group tradition and long usage have ensured a considerable uniformity of presentation. Older pharmacists regret the decline in recent years in the elegance of presentation that their predecessors considered to be most important in a dispensed medicine. Pleated bottle caps, white demy, pink string and sealing wax were aesthetically satisfying, and gave the patient confidence that the medicine so carefully packed had been prepared with equal care. Today, because of the complexity of many modern drugs and the problems of stability which arise with their use, the suitability of the container is in many cases more important than elegance alone, although a suitable container is often quite elegant.

The general instructions in the Terms of Service for chemists in the National Health Service regulations is that medicine should be dispensed in suitable containers. There seems to be no precise definition of "suitable," but the Drug Tariff does specify what would be unsuitable containers for powders and tablets. Obviously a suitable container must protect the preparation it contains from deterioration and contamination. The degree of protection necessary will vary with the preparation, and the criterion must be that the patient receives the medicine in the form and condition intended by the prescriber, and that it remains in that condition until consumed.

Striking changes have taken place in the relative popularity of various types of medicines prescribed in recent years, the most important of which has been the increase in prescriptions for tablets (from 30·8 to 42·0 per cent.) compared with those for mixtures and other liquid preparations (a decline from 44 to 32·7 per cent. between 1950 and 1957). It seems likely that that trend will continue, and some degree of uniformity in dealing with such preparations as tablets and capsules is most desirable.

## Tablets and Capsules

It would appear that the most widely used container for tablets is the skillet or folding carton. It has not been possible to obtain figures in support of that statement, but the report on the recent container allowance inquiry conducted jointly by the Ministry of Health and the National Pharmaceutical Union says: "The proportion of containers of the folding carton type

. . . which account for over 40 per cent. of containers of all types, was virtually the same for each of the three chemist groups." Clearly those folding cartons must have been used mainly for this group of products. The skillet affords the contents little protection from deterioration by exposure to moisture or heat, or to loss by deformation, and is only slightly better than the paper bag, which is specifically condemned by the Drug Tariff. One assumes that it achieved its present popularity first and mainly because it is cheap, and secondly because it is convenient to store and use.

A new factor in the situation is the British National Formulary instructions that certain tablets shall be dispensed in containers that prevent access of moisture, and that certain others must be stored in well-closed containers, or containers that prevent access of moisture. Some of the tablets in the second category (for example, isoniazid tablets) are ordered frequently in large quantities intended to last the patient several months. Since the patient must store them properly if they are not to deteriorate before he has taken them, those tablets too should be dispensed in a container that gives effect to the storage instructions. In addition, there is the responsibility of the pharmacist to help ensure that potent tablets are difficult of access to children. Those considerations would suggest that nearly all tablets should be dispensed in screw-capped glass bottles or vials or in containers at least as efficient as those.

Plastic containers are available but not popular with pharmacists, and published work seems to justify the use of glass. A. W. Bull reported to the Symposium Session at the 1955 Conference that during tests undertaken to discover the most suitable container for packaging penicillin tablets, it was found that polystyrene tubes were much less satisfactory than glass bottles.

It is unfortunate that, since the inception of the National Health Service, the choice of container has been governed largely by financial considerations. Most chemists consider the present container allowance too low to allow them to use a more satisfactory container for tablets than the folding carton. An increase of approximately 50 per cent. in the container allowance would probably be required to enable pharmacists to use screw-capped bottles instead of cartons; and that increase would not be revealed by an inquiry until a majority of chemists were using the more expensive container. It ought to be possible to bypass the normal costly and time-consuming processes of adjustment and arrive at an agreement whereby chemists used, and the Government paid for, containers that would more nearly satisfy the criterion of suitability, and at the same time afford a measure of protection to the children of careless parents.

## Liquid Preparations

For the dispensing of liquids, plastic screw-caps are replacing corks in many pharmacies as closures for bottles. They are quick and easy to handle, and their cost compares favourably with that of good quality corks. They do not break or shed pieces into the medicine, and they present a satisfactory appearance. Screw-cap bottles are often difficult to pour from, and viscous liquids tend to collect in the thread of the screw, but most pharmacists who use them claim that their advantages greatly outweigh their disadvantages. In the life of most liquid medicines dispensed extemporaneously there is unlikely to be serious interaction of bottle contents with the caps, except perhaps with certain alkaline preparations.

A number of new plastic containers have been introduced for eye-drops, lotions, dusting powders, creams and suppositories. All are expensive and unlikely to be used to any great extent for extemporaneous dispensing, at least in the near future. They are light and unbreakable, but in addition to their high price have other disadvantages. They are difficult to sterilise, permeable to gases, and subject to deformation, while ordinary dispensing labels do not stick to them. The dispensing of eye-drops sterile and in a container that can be used without subsequent risk of contamination of the contents is a difficult problem. Cheap, expendable containers, specifically designed for the product, may result during the next ten years from the mass production methods now being applied in the plastics industry, and the time may come when cost is one of the least important factors in the choice of a container.

## Dispensed Proprietary Medicines

The presentation of dispensed proprietary medicines is a subject that provokes controversy not only among pharmacists, but with doctors, manufacturers, and the public. The enormous increase (from 7 to 47 per cent.) in the prescribing of proprietary preparations over the past ten years poses problems of presentation that were practically non-existent prior to the inception of N.H.S.

The problems, primarily, are not technical, but stem from the usual doctor's dilemma, namely—should the patient be told, and if so how much? If the patient knows the name and therapeutic uses of the medicine he is taking, he will then make deductions, which may be incorrect, about his illness. In theory then, the problem is a medical one, but in practice the decision is usually one for the pharmacist.

The traditional pharmaceutical method is to remove all manufacturer's labels and external means of identification from the original container, which is then labelled with the doctor's instructions on the pharmacist's own label. If it is not possible to render the

container anonymous, then the preparation is repacked; and that is also the case when a proprietary preparation is dispensed from a bulk container. The dispensing of proprietaries from bulk is increasing constantly, as a result of Treasury pressure on the Ministry of Health to reduce the drug bill. Thus a wide range of the most frequently prescribed proprietary preparations are dispensed as non-proprietaries because the bulk pack price is less than that of the original pack. The chemist is paid on the assumption that he uses the bulk is increasing constantly as a result demand he experiences is too small to warrant its use.

#### COMPROMISE METHODS

Many pharmacists, from reasons of belief or expediency, do not follow the traditional method. All sorts of compromises are adopted, and in extreme cases the preparation is sent out as received from the manufacturer without any additional labelling by the pharmacist. Then there is the problem of that large group of patients, which includes asthmatics, hypochondriacs, and the naturally suspicious, whose psychosomatic disorders yield only to their favourite nostrum in its original container and label. There again, unless the patient's doctor decides otherwise, most pharmacists supply the original pack. A few preparations carry, on labels or literature, detailed instructions for use by the patient. Those are usually dispensed in the original packing, but even when an original pack is supplied it is customary to remove all manufacturer's literature from the package, as it is usually intended for doctors and pharmacists and not for the patient. Dosage instructions may differ from those given by the doctor, and it would be undesirable for the patient to see, for example, information about side-effects.

#### PREScriBERS' ATTITUDE

Medical men in general appear to dislike their patients' knowing the name and nature of the medicines prescribed for them. There are good reasons for that dislike. The patient, from inadequate knowledge, may guess wrongly at the nature of his complaint, and imagine that he is more seriously ill than he really is. Knowledge of the prescription often leads to self-medication, and worse still to the diagnosis and treatment by the patient of his friends. Self-medication may lead to dangerous delay in seeking medical advice. It is sometimes argued that self-medication and presumably self-diagnosis would save the country and taxpayer money. This can be true only in the purchase of simple household remedies. The largest part of the drug bill is accounted for by drugs and preparations, such as antibiotics and Schedule 4 drugs, that cannot be purchased without a prescription. Patients demand those preparations without a prescription, and that trouble could be prevented if all such medicines were dispensed in a form unidentifiable by the patient.

#### VIEWPOINT OF MANUFACTURERS

Some doctors and patients profess to regard the removal of labels and literature as a last despairing effort on the

part of the pharmacist to maintain the mystery of his calling. The younger pharmacists know that, in the place of compounded galenicals often as harmless as ineffectual, they are handling specific remedies of great potency. Their knowledge of action and uses, of formulation and dosage, is often of vital importance to the prescriber and patient; and they tend to become a little impatient of problems of presentation. They favour the "open" approach and believe that the patient should know precisely what he is taking. In that belief they are backed up by many manufacturers who like the advertising value of "original pack" dispensing, which has helped many of them to build up considerable over-the-counter sales. For preparations such as throat lozenges, nasal sprays or rubefacient balms that seems to be unobjectionable and even desirable. However, when the prescribed preparation is unsuitable for counter sale, or where its sale except on prescription is illegal, the advertising value of "original pack" dispensing must decline, and it certainly then becomes objectionable to the pharmacist. Many manufacturers go to a great deal of trouble to make difficult the removal of labels, and, in the case of tablets, seek to render their products easily identifiable by embossed patterns or letters, unusual colours and curious shapes. If the patient can identify a medicine he may insist on a doctor prescribing it; that sort of sales promotion is of doubtful value to the manufacturer since it irritates the prescriber and may lead to a loss of medical goodwill.

On the other hand, some manufacturers go to a lot of trouble to help the pharmacist by making their labels easy to remove. Liquid preparations are packed in bottles of convenient size, with the labels secured by one edge only. Ointments are labelled on a paper sleeve that can be slipped off; and at least one firm uses a type of plastic enamel which can be stripped off the tube quite easily. It is questionable whether one is justified in spending much time on the removal of labels; for example, not many chemists today would remove the enamelled inscription on an ointment tube; but on the many occasions when anonymous presentation is necessary or desirable, surely the pharmacist is entitled to expect the co-operation of the manufacturer so that it can be done easily and quickly.

#### "Nomen Proprium"

Some doctors believe that not only proprietaries but also non-proprietaries should be clearly labelled with the name of the medicine, and all have met prescriptions with the instruction that that should be done. In the *British Medical Journal* in December 1957 a letter from C. Wilson Peck and G. Bryan (of the Association of Teaching Hospital Pharmacists) defended the traditional method of anonymous presentation. In a subsequent letter, a doctor described the removal of labels and literature as magic survivals, and expressed the opinion that patients collaborate more effectively when they know what they are taking. (One assumes that a corollary would be that

the patient should have precise knowledge of his illness.) He made the suggestion that there should be a special code for cases where it was undesirable for the patient to know the name and identity of the medicine, for example, "not O.P." (original pack) or "not N.P." (*nomen proprium*): in other words, the opposite to the position that obtains at the moment. Other medical correspondents made the points that, in a case of poisoning, "N.P." dispensing makes identification of the poison much easier, and that self-medication with a named drug is safer than with an unnamed one.

The final word in this controversy must rest with the prescriber. But doctors are divided in their views, and in the majority of cases seem content to leave the decision to the pharmacist. It is important that pharmacists should make up their collective mind on this matter, and desirable that a measure of uniformity should be achieved.

The other introductory paper put forward:—

#### Views of a Manufacturing Pharmacist

ARTHUR R. G. CHAMINGS

IMMEDIATELY after the 1914-18 war, when I started dispensing, every bottle, tube and other container of "patent" medicines was so scraped, filed, treated with solvents or otherwise man-handled that the patient would have no idea, so far as we were aware, of what he was receiving, apart from the fact that it was a liquid, tablet, pill or suppository.

We are convinced that the National Health Service has come to stay. Are we not also convinced that the old order of the presentation of dispensed medicines must change? The factors to be considered are: the prescription; the pharmacist; the prescriber; the patient.

#### The Prescription

Although an outcry is being raised against those who "batten on the National Health Service," nothing can halt the march of progress in any field of science and certainly not, it is hoped, in those fields which contribute to the cause of peace and the alleviation of human suffering. The signal discovery is, however, rare and, in any case, is closely related to numerous small advances in any particular field of research. In medicine it is well recognised that for every significant therapeutic advance there are several hundred "non-runners." Even so, the prescriber today has an armamentarium of drugs, most of which were unthought of half a century ago, and the best of which are the product of the last two decades.

Whereas in the B.P., 1914, there were only four synthetic organic substances, the number had increased from thirty-six in the 1932 B.P. to eighty in the 1948, 163 in 1953. Today, in the new *Pharmacopœia*, the number is of the order of 250.

In the British National Formulary, 1957, the editors have maintained the

quota of "misturæ" (nearly seventy of them), amongst the complex chemotherapeutic and biochemical agents also included in that B.N.F. The average for the country is still only of the order of 50 per cent. of each, a proportion of new drugs to old much lower than that prevailing in any other developed country.

The older pharmacist is today in a quandary over the presentation of the new agents. Is he to follow the instruction of his Victorian apprentice-master and effectively remove, so far as possible, every evidence of the nature of the prescription, or must he, wherever there is no call for obliteration, provide the patient with the recognisable product specified in his prescription? In many European countries, where medical specialities are largely dispensed in original packs, the label of the container is removed only if specifically requested by the prescriber. In Germany it is legally required that permission to remove the manufacturer's label shall be expressly given. Admittedly, in the United States of America the utmost assiduity is, by contrast, still exercised in preventing the patient from knowing what he is having. Which approach is the more realistic?

#### The Problem for the Pharmacist

The fact that in Continental and American pharmacy the incidence of proprietaries in dispensing has already reached such proportions as 80 or 90 per cent. points to the inevitable in British medicine too, whether under the National Health Service or no. Who in future will prescribe empirical polypharmacal preparations which have never been under controlled trial and the active constituents of which may be unknown, when specific remedies are at hand with precise activity, the destination of which is known and the end-products of which are ascertainable in the human body? If, under the National Health Service, the enlightened medical man can prescribe what he judges appropriate to the needs of the patient, surely he will almost invariably call for the specific agent. That means that the pharmacist must face increasingly the problem of transferring the therapeutic agent from the efficient container of the manufacturer to the usually much less satisfactory receptacle which he is allowed to use under the National Health Service and for which, incidentally, he must be paid. Why should he not be encouraged to follow the rational procedure of applying his label to the container already available and at no cost to the Service except the pharmacist's fee?

Admittedly the manufacturer must be prepared to collaborate in the development. If it is desirable that the patient shall not know what he is having, then some method of affixing the label by the manufacturer should be devised to facilitate the work of the pharmacist, and if the manufacturer is convinced that his product should reach the patient in the condition in which it has left the pharmaceutical laboratory, then he should see to it that the units provided for

dispensing are appropriate to the normal needs of the patient for particular short periods of treatment, i.e. seven or fourteen days. That may involve a re-examination of packaging methods by manufacturers. If tablets are transferred from a dispensing pack to a printed carton, contamination and deterioration may take place. It is surely also a factor of some psychological significance that patients shall recognise what they are getting as the products of reputable manufacturing houses and without any question of possible substitution. Beyond those considerations, the time consumed by the average pharmacist and wasted by the waiting patient is worthy of thought in modern dispensing practice, and the more the procedure can be facilitated from manufacturer to patient the better for all concerned.

Whereas the older doctor may still adhere to his "nostrum" outlook, the prescribing of the younger medical man will increasingly move toward the medical speciality, and the rapid increase of the number of such products over the past ten years emphasises the need for manufacturer, doctor and pharmacist to reach agreement over packaging and dispensing procedures satisfactory to all, and particularly to the patient. With that question of packaging there will, of course, arise the problem of the manufacturer's leaflets. Where those contain essential information to the busy prescriber and simple instructions to the patient, they may well be of value.

#### The Prescriber's Position

The doctor today is as concerned as ever that his patient shall recover. If his pharmacological training was based on the known *materia medica* of the first quarter of this century, he is nonetheless alive to advances in therapeutics, and is anxious to learn of newer weapons through the published literature of the pharmaceutical research houses and their representatives.

There is a growing practice among the medical profession of disclosing to their patients the identity of the pre-

scription for which they are calling. There are those medical men who believe that it should be made compulsory for the chemist to label every medicine in such a way that its composition is clearly and fully described on the container. It happens, not seldom, that medicines are mixed up in the household and the wrong drug taken or given to children. In partnerships, different doctors may see the same patient, and it is desirable that each should know quickly what treatment is being given.

#### The Patient

Although the patient is not necessarily aware of the transformation in prescribing practice over the years, he is certainly a more informed and travelled person than his grandfather. What he does not read in digests about modern medicine he can learn from radio or television. Should the doctor write his prescription illegibly so that the patient cannot read it? It has been stated that some patients collaborate more when they know what preparations they are taking. Let the patient, therefore, with but few exceptions, know that he is being treated with proven therapeutic agents. If faith should be a significant factor in his healing process—and who shall doubt it?—then its efficacy is enhanced by the instructed mind of the sufferer. Let it not be said that the pharmacist is in opposition if the medical profession supports the informing of the patient.

Mr. Chamings provided a small display of proprietary preparations obtained on prescription in France, Germany, Italy, Switzerland, India and the United Kingdom. All were as originally dispensed with the exception of the British preparations, which were in the packs supplied by the manufacturer.

#### Discussion

MR. W. TALVAN REES, Cheltenham, disagreed with Mr. Chamings that manufacturers' literature should be left in the pack when dispensed. Mr. Chamings had said that he thought it might give useful information and advice to the patient. "I think that is quite



Dr. Parkinson reads the first paper at the first professional session.



# of the LLANDUDNO BRITISH PHARMACEUTICAL CONFERENCE

WHERE LEWIS CARROLL LIVED AND WROTE

SEPT.  
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wrong, because the leaflet gives one set of instructions, the doctor gives the patient another. The patient reads the label on the container, reads the leaflet, and comes back to tell the pharmacist 'you are wrong.' Mr. Talvan Rees said Mr. David had presented arguments for suitable containers for the packing of tablets and capsules. There was only one suitable container: a glass bottle. Unfortunately, inquiries into the cost of containers were based on what the pharmacist was currently using. Pharmacists stood to lose, he argued, if they now all began packing tablets and capsules in bottles because they would not be paid in full for doing so until another inquiry was held and it was established that the practice was uniform.

### Leadership Required

MR. T. HESELTINE, Normanton, said that Mr. Chamings apparently did not think much of the British National Formulary. Mr. Heseltine, on the other hand, did not think much of manufacturers' literature! "Mr. Chamings probably represents the views of many manufacturers who have the fixed idea that they should teach the practising pharmacist how to dispense. Someone has to teach us how products should be presented to the public, but I would say that that is not the job of the manufacturer. I think the time has arrived when someone should give a lead, someone to whom we can look for guidance. We should look to the Council of the Pharmaceutical Society. The time is overdue when the Council should pay serious attention to the difficulty of dispensing medicines." Mr. Heseltine added that he thought the best dispensing was still done in Britain.

If Mr. Chamings projected his thoughts to the future, said MR. T. REID, Haslemere, the logical conclusion of the trends he appeared to favour would be that the patient would present a prescription to an electronic-machine operator who would make out a punched card, pass it through the machine, which would deliver the medicine at the other end! But that was not pharmacy. Mr. Reid deprecated Mr. Chamings's "somewhat scathing" remarks about the British National Formulary. Pharmacists, pharmacologists, etc., of the highest calibre gave their services to that excellent book that was so useful to all. "The B.N.F. is still in business, despite the fact that it does not use high-pressure business methods of publicity." In the opinion of doctors prescribing them, nostrums still served a purpose—at a charge much lower than many polypharmaceutical preparations. While many were there for purely symptomatic treatment, the same was true of half the proprietary preparations today. Mr. Chamings seemed to envisage the pharmacist as the hander-out of repacked medicines in standard amounts. Mr. Reid appealed to manufacturers to let pharmacists know the storage limitations of drugs and medicines and their admixture limitations.

"Dog still does not eat dog," countered MR. CHAMINGS, replying to Mr. Reid. "We are all here today as phar-

macists. I have been in retail, hospital and teaching pharmacy. I am now a manufacturing pharmacist. And, of course, Mr. David and I are here to stick our necks out." He appreciated Mr. Heseltine's comments about the leaflet in the package "but patients probably do not read them, and that is also probably a failure of the pharmacist. How little we know of the preparations we are handling." Sir Hugh Linstead, at the previous week's meeting of the International Pharmaceutical Federation, had said that the old order was changing. "It is changing rapidly, and we are not keeping up. I wonder how many of you read, before you came here this morning, the papers that Mr. David and I spent nine months preparing? The suggestion that I do not think much of the B.N.F. is certainly not true. It is a valuable publication, but again I would ask how many of us have read it? And how many have dispensed the seventy, or even ten out of the seventy, polypharmaceutical preparations in the B.N.F.? So far as Mr. Reid is concerned I think that we should try to reconcile the views of all engaged in pharmacy and affected by this problem. We have to get together. Doctors are all at sixes and sevens, and manufacturers are only just beginning to get together to discuss the problem. Something must be done, and if you agree that you should take part in deciding what should be done, then we shall be nearer a solution. I still think that we cannot change the conditions of today. Sir Hugh Linstead made that abundantly clear.

MR. DAVID said that he thought that pharmacists had to reconcile themselves to an increase in original-pack dispensing. Manufacturers should apply themselves to developing packs that the retailer could use for dispensing, as against those used for counter sale. "I dislike as much as anyone the feeling that we are becoming just distributors for the manufacturers, but we must not take too pessimistic a view."

### A Single Principle

MR. J. C. BLOOMFIELD, Portsmouth, quoted from Mr. David's paper before proceeding to comment. Mr. David had stated: "For preparations such as throat lozenges, nasal sprays or rubefacient balms, this [over-the-counter sales of "original packs"] seems to be unobjectionable and even desirable. After all, it saves the time of the doctor, and encourages the sale of reliable preparations. However, when the prescribed preparation is unsuitable for counter sale, or where its sale except on prescription is illegal, the advertising value of "original pack" dispensing must decline, and it certainly then becomes objectionable to the pharmacist." Mr. Bloomfield said that pharmacists could not have the best of two worlds. They could not say that a product could be freely saleable because it was unscheduled or was a satisfactory article and that it could therefore be sold in its original container, and at the same time say that other products which were only available on prescription must be dispensed out of the original container and in some

other form. "The principle must be established of the method of dispensing proprietaries—whether freely or restricted to prescriptions only. As Mr. David had pointed out, we are aware of the large number of prescriptions that must be dispensed from bulk packs, but how would Mr. Chamings overcome the difficulty of dispensing prescriptions for, say, 250 tablets, if his idea of standard packs of twenty-five or fifty tablets was adopted? He would have to supply five or ten packets to the patient. Is that a suitable way to dispense?

### A Joint Committee to Investigate?

The problem of labelling dispensed proprietary preparations, continued Mr. Bloomfield, was complicated. The volume of prescribed proprietaries has increased 15 per cent. since 1955. "I would suggest that a joint committee should be set up between manufacturing and retail sides of pharmacy to discuss the problem and that such a committee should include representatives of the medical profession to discuss the problem." The medical profession should be invited, because within that profession there was a lot of muddled thinking on the same problem. The committee should formulate a uniform method of dispensing proprietaries.

MR. V. REED, London, said that, as professional men, pharmacists should be allowed to use their discretion as to what each of them believed the proper way to dispense proprietaries.

Speaking from his wide experience, including twenty-four years in retail pharmacy, MR. H. HUMPHREYS JONES said that the proper way to dispense proprietaries was to remove all the manufacturers' literature from the pack and to hand it to the patient with only the chemist's label on it.

Replying to Mr. Bloomfield, Mr. CHAMINGS said that, if his thesis held good, he was certain that manufacturers must do what was done on the Continent, that was to introduce uniform packaging so that doctors could order in uniform amounts. He agreed with the idea of a joint committee. Despite all that, the handing-over of the finished products was only a side issue. "The real point is that pharmacists have the knowledge. Are you just pedlars of manufacturers' packages? Have you no responsibility to the patient? Thirty years ago when I was in retail I often told patients something of the products they were being given. We have the knowledge of the preparations, and in that way we are a profession and not a trade."

MR. N. J. VAN ABBE, Loughborough, thought manufacturers should take Mr. Reid's appeal seriously and that, if bulk packs were to be continued to be used, they should give further information on storage and admixture limitations to the pharmacist who did the dispensing and probable repacking.

MR. G. J. HENDRA, Truro, said that pharmacists should be wary of going to Europe for examples of the packaging and dispensing of ethicals. He asked whether manufacturers of ethicals ever sought the views of retail pharmacists on the form the packaging

should take. Ethical manufacturers should give room for the retailer to exercise his professional discretion on the form of presentation to the patient.

MR. H. J. BRAGG, Folkestone, pointed out that manufacturers could not force retail pharmacy to do anything against its will. It was up to retail pharmacists to make recommendations to implement their own views.

MR. J. B. LLOYD, Manchester, said that 80 per cent. of those present at that session earned a substantial part of their income from dispensing—not from giving advice to doctors. Mr. Chamings would have retail pharmacists reduce the dispensing transaction to the equivalent of the sale of a packet of cigarettes. "Mr. Chamings says in his paper: 'Why should he [the pharmacist] not be encouraged to follow the rational procedure of applying his label to the container already available, and at no cost to the service except the pharmacist's fee.' What should the fee be paid for in those circumstances?" asked Mr. Lloyd.

#### "Not the Concern of the Patient"

MR. A. E. THORPE, Manchester, said that the patient was given a prescription which was private information passed from the doctor to the pharmacist. Pointing to the display presented by Mr. Chamings, Mr. Thorpe asked: "Would you imagine that any of those patients had even seen a doctor? We are dispensers and it is our function to carry out the directions we receive from the doctor. We give the patient the finished product in an ethical manner. It is no concern of the patient to know what has been prescribed if they have faith in the doctor. The patient should not be interested in the name of the preparation. We should keep faith with the doctor by handing out the prescription in the best ethical way. All that the patient should know is how to use the preparation we have suitably dispensed."

Replying to Mr. Thorpe, MR. CHAMINGS said: "If I had sent out the prescriptions in Britain the question might not have been have they seen a doctor but have they seen a pharmacist."

MR. DAVID said that Mr. Bloomfield had accused him of wanting the best of both worlds. He thought Mr. Bloomfield had over-simplified the problem. "I agree with him that we should attempt to get a general principle that would be applicable to all prescriptions." Referring to the point he had made about over-the-counter sales of throat lozenges, etc., Mr. David said that he would stress that he was referring to products made by reputable firms under analytical control.

MR. G. H. WRIGHT, Leeds, suggested that Mr. Heseltine and others should, at the end of the Conference, buy a pair of nylon stockings as a gift for their wives, throw away the wrappers, and give them to their wives in a paper bag!

MR. P. G. FLOOD, London, disagreed with Mr. Chamings that patients would know that products came from reputable manufacturers if they were given the products in the original containers. It was time that a committee was formed to discuss the question and to

arrive at a solution. "Let Mr. Chamings and his critics get together fast and tell us what to do. But let us leave the doctors out of it. Let us formulate our own policy."

Mr. Chamings appeared to have come down in favour of Continental-type dispensing, said MRS. H. WILLIAMS, Reading. But had he considered that Continental pharmacists did not have to face the same difficulties that arose in Britain with broken quantities and bulk packs.

#### "Beautiful Syrups"

DR. HAROLD DAVIS, London, said that Mr. Chamings' sarcasm about the British National Formulary had led Dr. Davis to think that he was attacking it. Mr. Chamings spoke about the 1914 B.P. and to the "beautiful syrups" it contained "but now we have more beautiful syrups, in more beautiful containers—at more beautiful prices. Mr. Chamings resents the fact that doctors can prescribe what they think is necessary for the patient. In his post-graduate training in pharmaceutical industry he seems to have learned that it is the manufacturer who should tell the doctor what to prescribe! I would ask Mr. Chamings, if he can consider this subject objectively, whether he would put forward a paper such as he has presented to us this morning?"

The practice of not removing medical literature from original packs created an indirect form of advertising to the public, claimed MR. T. LLOYD-JONES, Denbigh.

MR. A. DUCKWORTH, London, said that various speakers had advocated the formation of a committee to discuss the problem, but he would remind them that there were already in existence two committees representative of the various pharmaceutical organisations that were discussing the questions of the marketing and dispensing of proprietary medicines. Discussion on the subject by one of those committees had been deferred because the views of retail pharmacy were not known. He believed that was why the subject had been put up for discussion at that professional session of the Conference. Unfortunately he thought that there had been "more heat than light" from the discussion so far. "I think that when that committee does present its report it should give all the reasons for its conclusions."

Pharmacists should use their own discretion as to how proprietary medicine should be presented to the patient, said MR. A. J. C. BULL, Portsmouth.

Replying to the debate, Mr. Chamings said that, on the Continent, prescribing of proprietary packs was always understood to be in sequence, and the smallest unit pack was the one used as a basis. The Ministry of Health was making it increasingly clear in this country what should be dispensed in certain circumstances, particularly where the prescriber did not indicate quantity. So far as Dr. Davis's "beautiful syrups" were concerned, were they pharmacologically tested "like our beautiful syrups are?" Mr. Chamings admitted that he had not spoken altogether objectively but he had

spoken sincerely and believed what he had said. The Ministry of Health advised doctors what to prescribe through *Prescribers' Notes* and because that was done manufacturers had an obligation to pass on information to the doctor and to the pharmacist.

MR. DAVID thought that the trouble with most committees was that they talked a lot but did little. "I think that before we can change anything, members of this Conference and of the Pharmaceutical Society should decide for themselves what should be done."

In bringing the session to a close, MR. D. W. HUDSON (who was in the chair) said that the problem was still not solved. Pharmacy was still a long way from accepting any one hard-and-fast rule. He was sure that all those present would join him in paying tribute to both authors for their excellent papers.

## VISITORS FROM OVERSEAS

A NUMBER of pharmacists came on to Llandudno from Brussels, where they had been attending the congress of the International Pharmaceutical Federation. In a car she bought on the Continent came Mrs. L. E. Shaw, chief pharmacist at St. Elizabeth's Hospital, Seattle, Washington. With her on a holiday that is taking them to Ireland and Scotland was Miss Young, the first British woman pharmacist to secure registration in the United States. Miss Young studied at Glasgow under Professor Todd and qualified in Britain, and during the 1939-45 war managed a pharmacy in Piccadilly, London, W.1. Emigrating to the United States via Canada she secured her American registration after an examination in Washington State, but was not required to serve the equivalent of an apprenticeship. She is now in charge of the pharmacy department of a New York hospital.

#### From Europe and from the East

Other overseas visitors present at Llandudno included Mr. H. Schaareman, head of the pharmaceutical development department, N. V. Philips-Roxane, Olst, Holland, who came to England specially to attend the Conference meeting; Dr. B. O. Alm, Stockholm (Sweden's chief military pharmacist); Dr. Bilquees Mir, a woman research pharmacologist from Karachi, now studying at Glasgow university for her Ph.D. degree; Mr. A. M. Ahsan, a research chemist from Karachi, who is to study at the School of Pharmacy, London University, and who at the time of the Conference meeting had been in England only two weeks; Mr. S. M. Kirpekar, Bombay (now in his third year of study at Glasgow University and shortly returning to India); and Mr. Sze Peng Lee, Hong Kong (chief pharmacist at the Johore General Hospital). Having obtained the Sino-British Fellowship Award, 1957-58, Mr. Lee has been undertaking post-graduate research at the School of Pharmacy, London University, and at University College Hospital, London, under the supervision of the chief pharmacist (Mr. T. D. Whittet). He is returning to Malaya in October.

## BRITISH PHARMACEUTICAL CONFERENCE, LLANDUDNO, 1958

## EVENTS OF THE WEEK

**Banquet**

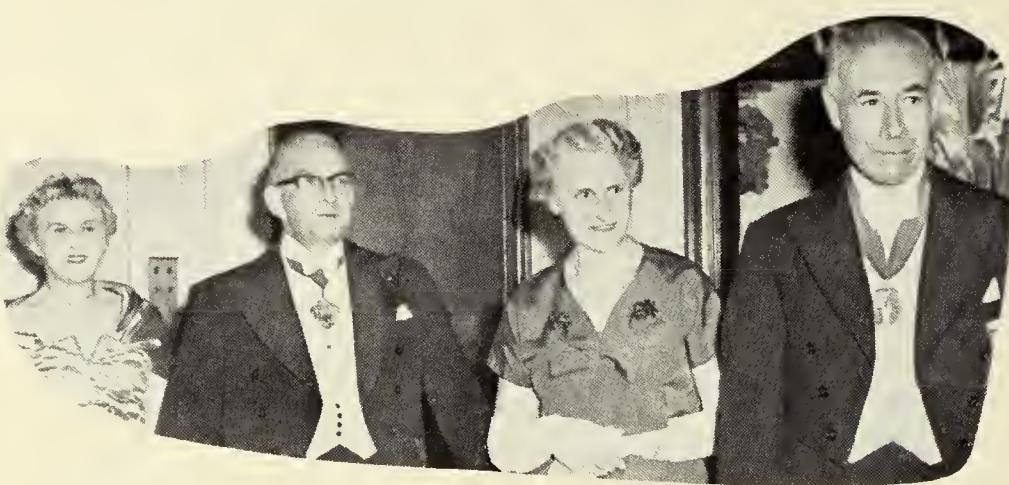
At the Conference banquet on September 18 the number of available seats was limited, so that many late applicants were unable to attend. The Conference chairman (Dr. G. E. Foster) presided, and the principal guest, who proposed "The British Pharmaceutical Conference," was Mr. JUSTICE GLYN JONES, T.D., who gave racy reminiscences of his father, the founder of the Proprietary Articles Trade Association, and of his own early days in pharmacy, first as an apprentice at Enfield and later as assistant to his father till the time he left pharmacy for the legal profession. His father, said Sir Hildreth, had been one of the sponsors of the marriage between Society and Conference. The Conference was a good thing and ought to be supported. DR. FOSTER replied. Sir Hildreth was the only judge of the High Court, he pointed out, who had a pharmaceutical qualification, and he had done the Conference the honour of breaking his holiday to attend the Conference banquet.

The Conference president (MR. D. W. HUDSON) proposed "The Urban District Council of Llandudno," whose chairman (and the chairman of the Conference local committee), Mr. Harold Neville, J.P., responded.

The Pharmaceutical Society's vice-president (Mr. Gwilym Hughes, an ex-mayor of Colwyn Bay) proposed in Welsh and English the toast of the guests, for whom PROFESSOR E. A. OWEN, M.A., Sc.D., M.Sc. (emeritus professor of physics, University College of North Wales) responded.

**Conference Excursion**

On the afternoon of September 17 twenty-one coaches left Llandudno carrying more than 600 delegates on the Conference excursion to Snowdonia. Two approximately equal parties followed identical routes, but in opposite directions. The tour took in the village of Dolgarech, scene of disaster in 1945 when a mountain dam burst into the market town of Llanrwst (home of William Salisbury who first translated the New Testament into Welsh), the historic "rocking bridge," built in 1636 by Inigo Jones, and one of the first bridges built across the River Conway, the remains of an ancient Druids' circle, Betws-y-Coed, "the valley of trees," the famous Swallow Falls, Capel Curig, a village among the mountains at the junction of three valleys, the twin lakes, famous for fishing, Gwryd Pass (with its magnificent view of the Gwynant valley), and the Llanberis Pass, Vaynol Park, Bangor (home of the University College of North Wales and of an eleventh-century cathedral), Penrhyn Castle, the historic village of Aber, Llanfairfechan and Penmaenmawr into Conway. A descriptive route plan and guide prepared by THE CHEMIST AND DRUGGIST from material supplied by the Conference local committee, contributed to make the outing as informative as it was enjoyable.



BANQUET RECEPTION: Mrs. and Mr. D. W. Hudson (Conference president) and Mrs. and Dr. G. E. Foster (Conference chairman) about to receive the guests.

**Sporting Events**

The Edmund White GOLF trophy was won this year by Mr. H. Warburton (84-17-67), with Mr. F. E. Mellor (81-13-68) runner-up. Scratch prize went to Mr. A. H. Newcombe (79). Each entrant was presented with a golf ball by the local organisers of the competition.

Apart from lack of entries in the BOWLS competition, a further complication was that Llandudno is in a crown-green area, whereas the competition is played under English Bowling Association rules. The Conference Local Committee therefore provided tankard trophies to the winners of a specially arranged competition in which the winners were Messrs. S. C.



FIRST DANCE: The president of the Pharmaceutical Society and his lady (Mr. and Mrs. D. W. Hudson) take the floor for the first dance at the Conference ball.

Higgs, Thames Valley; and L. R. Renwick, Newcastle-on-Tyne.

In the Jephcott TENNIS tournament the winners were Miss F. Reynolds and Mr. O. N. T. Davenport; runners up: Mrs. F. W. Cottam and Mr. F. B. King.

**Non-programme Events**

Hospital pharmacists and their friends from England and overseas attending the British Pharmaceutical Conference meeting assembled at a social meeting on the evening of September 17. Numbering about 100, they included Mr. J. W. B. Fish (chief pharmacist, Dover Group of Hospitals and president of the Guild); Miss E. M. Hirst (registrar); Mr. E. J. Fitchett (treasurer); and Mr. N. Paterson (chairman, Liverpool and North Wales Branch). Local hospital pharmacists present included Miss Griffith Jones (Caernarvon and Anglesey Hospital, Bangor) and Mr. J. Fogg (Royal Alexandra Hospital, Rhyl).

Overseas visitors included Miss Ulian Khoo, Hong Kong; Mr. Sze Peng Lee, Hong Kong; Dr. B. Mir and Mr. A. M. Ahsan, both from Karachi; Mr. S. M. Kirpekar, Bombay; Mr. H. Schaareman, Amsterdam; and Miss A. G. Young, who holds both British and American pharmaceutical qualifications and has charge of a 1,700-bed general dispensary in New York. An American pharmacist visitor on her first trip abroad was Mrs. Shaw, chief pharmacist at the St. Elizabeth Hospital, Yakima, Washington. After refreshments a comedy film was shown.

**Women Pharmacists**

A score of members of the National Association of Women Pharmacists present at the Conference were guests of their national president (Miss M. C. Dodd) at afternoon tea at her hotel on Thursday afternoon. An overseas guest, Miss Ulian Khoo, Hong Kong, was given a specially warm reception. The meeting was entirely social, but before it ended Mrs. A. Greenwood, Blackpool (a past-president of the Association) made a short speech of thanks to Miss Dodd.

On Wednesday evening of Conference week a special mass for Catholic pharmacists was celebrated at the Church of Our Lady Star of the Sea. The Bishop of Menevia (Rt. Rev. John Petit, M.A.) came into Llandudno for the occasion and the sermon was preached by a pharmacist (Father A. G. Smallwood, M.P.S.). Funds don-

ated at the Mass were devoted to the relief of the needy in Llandudno and district.

No less than nine vice-chairmen of the Conference attended the Llandudno meeting. In order of their dates of office as chairman they were Messrs. H. Deane (1936); H. Humphreys Jones (1940); T. E. Wallis (1942 and 1943);

A. D. Powell (1950); G. R. Boyes (1953); H. Davis (1954); J. P. Todd (1955); K. Bullock (1957) and F. Hartley (1957). Mr. H. Humphreys Jones, though not the doyen of them, possibly could challenge any of his distinguished colleagues in the number of Conference banquets attended. His tally was forty.

## CLOSING SESSION

### Invitation to Bournemouth in 1959 accepted

#### Closing Session

AT the closing session of the Conference on September 19, MR. H. P. CORRIGAN (vice-president, Pharmaceutical Society of Ireland), proposing the vote of thanks to the Conference local committee, spoke of the "work, worry, fun, hopes and fears" of the members of such a committee, and said that he could imagine that in an area so extensive and scattered as that of the local branch, the headaches at times must have been, like the Conference meeting, first-class. The running of that meeting had been "not as rigid as Bristol, not as free as Dublin, not as enthusiastic as Aberdeen," but there had been an atmosphere so satisfactory in so many ways as to make it a memorable occasion. Anglesey, North Carnarvonshire and Colwyn Bay Branch of the Pharmaceutical Society had exploited its lovely assets to the full.

The vote of thanks was seconded by MR. J. J. LEWIS.

The Conference chairman (DR. G. E. FOSTER) then presented to MR. H. NEVILLE (chairman, Anglesey, North Carnarvonshire and Colwyn Bay Branch of the Pharmaceutical Society) an inscribed gavel.

Replies, MR. NEVILLE thanked the members of his committee, especially its secretary (MR. MORGAN H. THOMAS) who, he said, had carried the bulk of the work.

The treasurer then presented his report, which was carried. The auditors were re-elected and the Conference Executive was elected for 1958-59. It included the six nominees of the Conference authorities, the two outside candidates who had compelled a ballot being defeated.

The Conference secretary (MR. H. G. ROLFE) presented the annual report, and in moving its acceptance MR. W. J. TRISTRAM referred to the appointment of MR. H. TREVES-BROWN as Conference chairman, 1958-59. Mr. Treves-Brown, he said, had been for nine years a secretary of the Conference, and for five years its treasurer. Mr. H. G. Rolfe, the new treasurer, had been a secretary for eleven years. DR. H. S. BEAN seconded the motion, and the report was accepted. MR. TREVES-BROWN replied on behalf of the newly elected officers.

The chairman then received an invitation from the Bournemouth Branch of the Pharmaceutical Society for the Conference to meet in Bournemouth, September 21-25, 1959. It was delivered by MR. H. RIDEHALGH (chairman, Bournemouth Branch of the Pharmaceutical Society). Mr. Ridehalgh said it was twenty-five years since the Conference had met in Bournemouth. Its

citizens had no mountains to show to the visitors, but they had "the leafy grandeur of the New Forest, the splendour of Salisbury, the awe-inspiring Stonehenge, and the hustle and bustle of Southampton Docks." They could comfortably accommodate 1,000 delegates, and they would like to be the first provincial meeting to have 1,000. Proposing acceptance of the invitation, MR. H. NOBLE (secretary, National Pharmaceutical Union) said that a more usual rôle for him was to act as spokesman for a group of middle-aged gentlemen better known for their busi-

ness acumen than for their scientific attainments. The British Pharmaceutical Conference was an important body compounded of many ingredients, leavened by progressive thought and deep erudition on the part of some who attended its functions. Bournemouth had taken on a heavy burden of responsibility to equal or out-do what Llandudno had done so splendidly during that week.

A vote of thanks to the retiring chairman was proposed by MR. C. W. RIDOUT and seconded by MR. W. TALVAN REES.

## SCIENCE SESSIONS

PROFESSOR BULLOCK read the next two papers at the first science session, the discussion on which was taken together. The first dealt with:—

#### Reactions Between Formaldehyde and Peptone

KENNETH BULLOCK and V. SUBBA RAO THE authors have studied the uptake of formaldehyde by peptone. By exposing peptone powder to the vapour phase over formalin for four days and drying the product *in vacuo*, relatively stable powders (formol-peptides) can be prepared. Different batches of such powders from the same sample of peptone are of similar composition but formol-peptides from different makes of peptone may differ widely in composition. The state of binding between the formaldehyde and the peptone in powder and in solution has been investigated by means of the chromotropic acid and Vörlander's reactions. The firmness with which formaldehyde is bound to peptone in solution depends not only on the quantities of formaldehyde and peptone present, but also on the previous relationship of the two substances. The reaction between formaldehyde and peptone has been found to be complex. Equilibrium is not readily obtained either in solution or when peptone powder is exposed to formalin vapour.

The second of the two papers was:—

#### Peptone and the Bactericidal Action of Formaldehyde

KENNETH BULLOCK and V. SUBBA RAO WHEN formaldehyde is used as a disinfectant in the presence of peptone the peptone and the bacteria compete for the HCHO, an equilibrium distribution of which is reached only slowly. The state of combination of HCHO in the presence of 1 per cent. of peptone varies with the previous relationship to the peptone. If, in all states of combi-

nation with peptone, HCHO were fully available to act as a disinfectant, peptone would neither retard nor reduce such action. Estimates of the proportions of HCHO in three different degrees of binding with peptone having been made, the authors inquired in which of those the HCHO remained bactericidal. They found that, if the peptone solution and spores were incubated at 37° C. for three hours before the addition of HCHO, all the spores were killed in sixty minutes by 0.1/M HCHO and in ninety minutes by 0.05/M HCHO.

(Both papers were from the pharmacy department, University of Manchester)

#### Discussion

DR. FOSTER, opening the discussion, said that the use of formaldehyde in the preparation of formol toxoids in which the toxic properties were largely destroyed while antigen producing activity was retained, was well known. The excess of formaldehyde in formol toxoids was sometimes removed by addition of sodium bisulfite.

DR. F. HARTLEY, London, was puzzled about some of the authors' conclusions. Hitherto Dr. Bullock's papers on peptones and formaldehydes had indicated that peptone reduced the effectiveness of formaldehyde as an antibacterial. From the second of his papers this year it seemed that peptone did not so startlingly modify the action of formaldehyde. Was it fair to say the modification was less when moisture was present?—The reply was that that conclusion was fairly true. But it was also true that in the formol peptones there was a higher ratio of formaldehyde present than in his previous experiments. It appeared that the slightest trace of moisture put up the disinfectant value lost in conditions of complete dryness.

(To be continued)

## HOSPITAL PHARMACY FORUM

## REFLECTIONS ON THE I.P.F. MEETING

HOSPITAL pharmacy has never lacked sea-lawyers ready to argue the case of justice, dignity, status or other shibboleths in the branch meetings and in the columns of the Press. A more serious interest in jurisprudence has now been demonstrated in the discussions that took place in Brussels during the Congress of International Pharmaceutical Federation when hospital pharmacists discussed the legal responsibility of the pharmacist for accidents arising from errors in the pharmacy. The discussions were noteworthy for their high quality and for the fact that at least three of the pharmacists who spoke were also qualified in law.

We are not continuously conscious of the dangers involved in the normal daily routine, but take certain principles and precautions for granted. It is only when an accident has happened that we are aware of the dangers involved in the handling of such a variety of medicaments as the modern pharmacy must hold. It is happily rare that the pharmacist finds himself sued for negligence, and that may lead to an oversight of the possibility of its happening. The I.P.F. hospital section has therefore performed a valuable service in bringing the subject to the notice of pharmacists throughout the world.

*Pharmacist's Responsibilities*

From the papers presented it emerges that in almost every country the pharmacist has at least two kinds of responsibility—under penal or criminal law and under civil law. In most countries there is also a responsibility to a professional organisation. The main differences are found in the application of civil law. In some countries that is based on Roman law and in others on Common law. In the one case a clear code defines the contingencies and the consequences, in the other, law is based on precedents and customs. There is considerable difference between countries in the degree to which the pharmacist is personally liable for damages arising from errors he may commit, or which may be committed by staff under his control. The matter has never been put to the test in courts in this country, although the responsibility may be assessed by suitable analogies. In some countries the pharmacist carries full personal responsibility, in others he is regarded as acting as an agent of the hospital, in which case responsibility rests on the governing body. A startling possibility was revealed in the case of Austria, where the law provides that a pharmacist who makes an error which is deemed to be due to ignorance or incompetence he may be required to present himself for examination in the appropriate subject matter before being allowed to resume practice.

From all the countries it emerged that, whatever the method of compensating the patient who suffers from the results of some error, the pharmacist has a duty to ensure that all reasonable care must be taken. This means that the standard of knowledge and care must be consistent with the professional qualifications and experience of the pharmacist. The person operating the service has a duty to provide proper and safe facilities to avoid accidents to patients, and that leads to two interesting possibilities. First, as the professionally qualified person employed by the hospital the pharmacist has the duty of drawing the attention of his employers to any deficiencies or other factors that he considers may constitute a danger and to insist that they be rectified. To do that demands a degree of freedom and responsibility in the exercise of his profession which the pharmacist must assume and upon which he must act spontaneously. For example, an inadequate system of storage for inflammable materials, or a room which is unfit for the preparation of injectable materials, or a deficiency of suitable staff are matters on which the pharmacist must take action to make his employers aware of the risk. The

second corollary is that the Minister of Health, as the operator of the hospital service, has a duty to see that drugs are handled and dispensed by suitably qualified and experienced people in conditions which provide adequate safeguards against foreseeable accidents. It is interesting to speculate on the outcome of a hypothetical case where the victim of an error might sue the Minister for failing to provide a pharmacist and adequate supporting staff in a hospital, with the result that drugs were mishandled. A further speculation worthy of serious reflection is the status of the recommendations in the Aitken report on the control of Dangerous Drugs and poisons in the hospitals. Though those are no more than recommendations it may be that a hospital where an accident occurred might be in difficulty in denying negligence if the recommendations had not been carried out.

Not all hospitals and not all hospital pharmacists will agree with all the recommendations of the report. Some items require further study: some may already be accepted in principle though applied slightly differently in detail. It may be an act of prudence for the pharmacist to set down in writing to his management committee or board of governors the extent to which the hospital is complying, the points on which there is disagreement and the alternative procedures, if any, which the hospital has decided to follow. In that way it can be subsequently maintained that reasonable care had been taken to prevent accidents.

The work of the Federation's Section of Hospital Pharmacists, though important, is only a beginning; it will be necessary to have a synopsis of the papers so as to stimulate further study.

Professional privilege and freedom of action are linked with responsibility and accountability; the one presupposes the other. It is to be hoped, therefore, that when the reports are available they will be given serious attention by all hospital pharmacists.

## MEDICAL ABSTRACTS

## HAIR-NET DERMATITIS

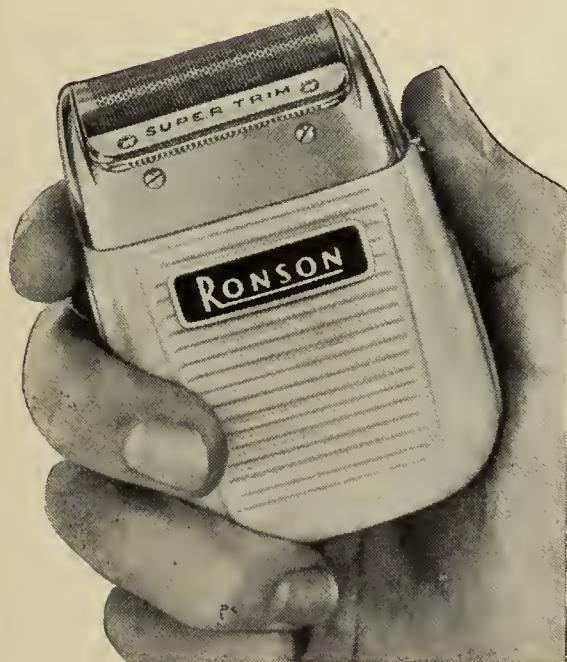
COLMAN, Marten and Wilson record the characteristics and occurrence of a dermatitis associated with nylon hair nets. (*Brit. med. J.*, 1958, ii, 544.) Because they consider many cases are undiagnosed, and themselves collected twenty-seven cases in eighteen months, they believe the condition is "not rare." Patch tests gave positive reactions to the nylon portion of the hair net and sensitivity was always attributable to the dye. The azo dyes used were almost impossible to identify. The rash resembled seborrhœic eczema, though with characteristic patterns. There was scaling, and vesicles might be found on the ear tips and along the hair margin. Behind the ears the condition might be moist and exudative. Most patients had little previous history of sensitivity or allergies, and were not sensitive to nylon garments.

## AN ORAL ANTI-DIABETIC

MURRAY, Riddell and Wang (*Lancet*, 1958, ii, 553) have provided data about forty-three patients who received chlorpropamide (N-propyl-N-(p-chlorobenzene sulphonyl)urea). The patients were selected on the basis that they had suffered from diabetes for less than ten years, were over the age of forty, and had been taking insulin, if at all, for not more than two years. The tests demonstrated that chlorpropamide is an orally effective hypoglycaemic agent but that, in common with similar drugs, its action is unpredictable. Normally a daily dose of 1 gm. is adequate and, provided a good response is obtained, the dose may be reduced after a few days, to the lowest therapeutically effective level. Toxic effects observed were not serious. Nine patients out of the forty-three showed side-effects, four of them occurred when daily dose was 2 gm. Nausea, a diffuse erythematous rash and drowsiness constituted the side-effects.

# MASSIVE NEW CAMPAIGNS FOR **RONSON** SHAVERS

Ronson shavers are all set for a massive, two-phase advertising campaign . . . beginning next month, mounting to a Christmas climax

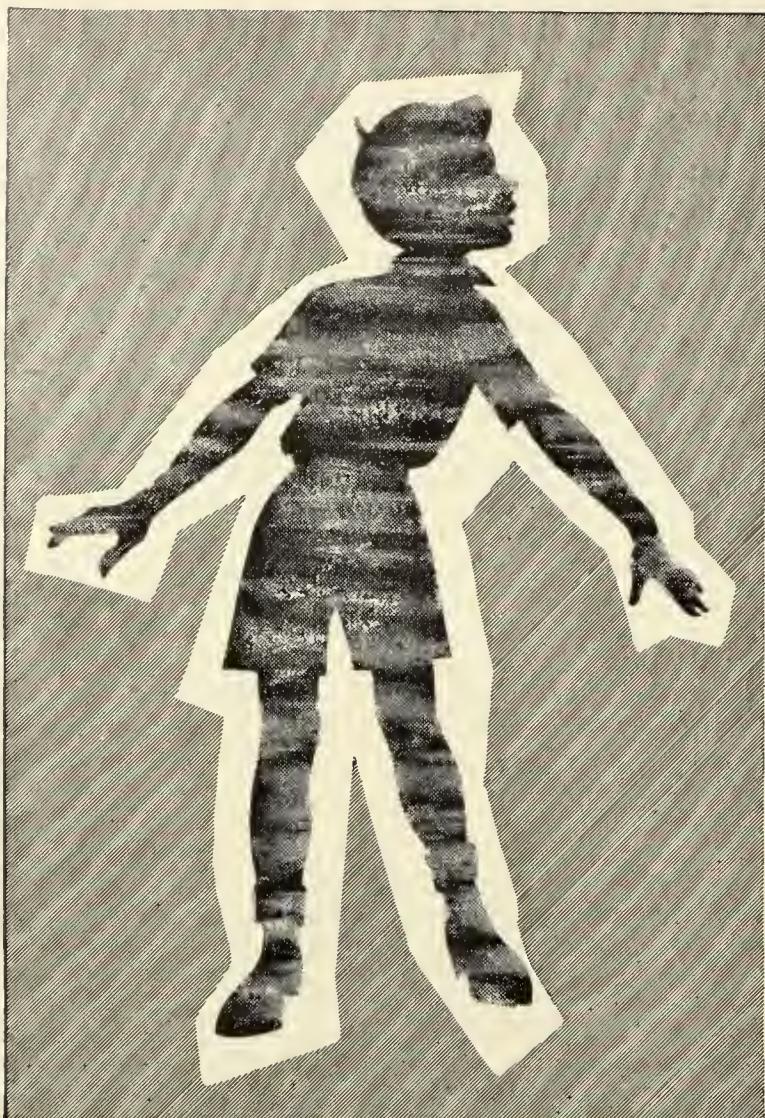


Phase 1 is imminent—early October to November. Impelling big spaces in all the large circulation national daily papers, selling the *advantages* of Ronson shaving: the pleasure, the comfort, the sheer modern efficiency of the Ronson.

Phase 2 comes in November - December, selling Ronson shavers as *Christmas gifts*. The pattern: even larger spaces (4 columns wide the full length of the page) in Sunday papers and the provincial press. *Plus* millions of supporting advertisements in the national daily papers (twice a week for the first three weeks of December in every paper). *Plus* a very concentrated 28-day TV campaign—14 separate transmissions from every station at peak times, 15 seconds a time, every time a good hard seller.

**Ronson shavers are all set to sell. So use your windows, display boldly, cash in.**

**RONSON**—makers of the world's greatest lighters and shavers.



resistant  
**EPILEPSY**  
responds  
well to -

# DIAMOX\*

A C E T A Z O L A M I D E

Of all the applications of DIAMOX acetazolamide, few are more welcomed in clinical practice than is its value in epilepsy. Freedom from epileptic seizures has been observed in numerous cases of grand and petit mal following treatment with DIAMOX. The drug has shown an unusually beneficial effect on resistant cases of petit mal. It is effective when used alone and of particular value when used in combination with the usual anticonvulsants. Highly versatile, DIAMOX has long been recognised for its value in other conditions including cardiac oedema, glaucoma, premenstrual tension, toxæmias and oedema of pregnancy, drug-induced oedema, etc.

Available in oral tablets of 250 mg. (engraved). Bottles of 25, 100 and 1000. DIAMOX Acetazolamide Sodium Parenteral Vials of 500 mg.

\* REGD. TRADEMARK



LEDERLE LABORATORIES DIVISION

Cyanamid OF GREAT BRITAIN LTD., London, W.C.2



## TRADE REPORT

The prices given are those obtained by importers or manufacturers for bulk quantities or original packages. Various charges have to be added whereby values are in many instances augmented before wholesale dealers receive the goods into stock. Crude drugs and essential oils vary greatly in quality and higher prices are charged for selected qualities.

LONDON, SEPTEMBER 24: Although trading in CRUDE DRUGS showed no improvement on previous weeks the general undertone of the market was firm, limited offerings from origin and reduced stocks on the spot being contributory factors to the condition.

A report from the United States states that crops of botanicals have fallen short of expectations because of heavy rains in the growing areas which in turn has retarded drying operations. SENEGA was again quoted firmer at origin and although the spot value did not move in sympathy it is expected to do so shortly. Chinese MENTHOL was sixpence per lb., dearer on the spot, while AGAR eased slightly in both positions. There were no offers of IPECACUANHA from Brazil or Costa Rica while Colombian was one shilling per lb. dearer at 56s., c.i.f. Natural LIQUORICE ROOT is difficult to find on the spot and Russian is not offering for shipment. Shipments of Tinnevelly SENNA from the port of Tuticorin for August are given below:

	U.K.	U.S.	EUROPE
SENNA	Tons	Tons	Tons
LEAVES	36	36	203
PODS	11	2	84

In our report for the shipments during July (C. & D., August 23, p. 201) the United Kingdom entry for pods should have read 28 tons and not as stated.

Among ESSENTIAL OILS Madagascar CLOVE LEAF is difficult to find on the spot, the nominal price being sixpence per lb., higher than previously. Chinese ANISE was threepence per lb. dearer for shipment but Penang PAT-CHOULI and East Indian SANDALWOOD each dropped 2s. 6d. per lb.

A list of nearly fifty additional items has been added to the list of chemicals subject to Key Industry Duty (see p. 321).

### Pharmaceutical Chemicals

AMIDOPYRIN.—Minimum rate is 25s. 2½d. per lb. with usual differentials for smalls.

AMYLOBARBITONE.—B.P.C. is 77s. 6d. per kilo for minimum 25-kilo lots and SODIUM, B.P.C., 87s. 6d. per kilo.

BARBITONE.—Rate for less than 50-kilo lots is 53s. 6d. per kilo. The SODIUM derivative is 56s. 9d. per kilo.

BARIUM SULPHATE.—250-kilo lots of B.P. (x-ray) are now 3s. 3½d. per kilo.

BENTONITE.—Offers of B.P. material are about £70 per ton as to quantity.

BENZOIC ACID.—1-cwt. lots are 2s. 11½d. per lb.; and SODIUM SALT is 2s. 9½d. per lb. in 1-cwt. lots.

BORAX.—B.P. grade for quantities of 1 ton and upwards; Granular, £55; crystals, £57 10s.; powder, £58 10s.; extra fine powder, £59 10s. per ton. Supplied in hessian sacks. Prices of commercial range from £45 to £50 10s. per ton, as to type and packing. Dehydrated borax is £68 per ton in paper-lined hessian bags or £67 in paper bags; carriage paid in Great Britain. Surcharges for smaller quantities: Less than 1 ton but not less than 5 cwt., 1s. per cwt.; 3 cwt., 2s.; 1 cwt., 3s.

BORIC ACID.—Prices (per ton) for B.P. grade in quantities of 1 ton and upwards are as follows:—Granular, £89 10s.; crystals, £96 10s.; powder, £94; extra-fine powder, £96 per ton, in lined hessian bags, carriage paid in Great Britain. Less £1

per ton if supplied in paper bags. Technical grades range from £75 10s. to £85 per ton according to type and packing.

BROMIDES.—Prices per lb. are as follows:—

	1 cwt.		5 cwt.	
	s.	d.	s.	d.
POTASSIUM ..	2	6	2	5
SODIUM ..	2	6	2	5
AMMONIUM ..	2	10	2	8½

The prices quoted are for crystals (powder is 1½d. per lb. more) packages free, carriage paid terms. The kilo rates for 50-kilo lots are 5s. 6d. for potassium and sodium and 6s. 3d. for ammonium.

BUTOBARBITONE.—B.P.C. is 82s. 6d. per kilo in minimum 25-kilo lots.

CALCIUM CARBONATE.—B.P. light-precipitated powder is £32 per ton, ex store.

COCAINE.—For 16-oz. lots the price of the HYDROCHLORIDE is 91s. 6d. per oz. and ALKALOID, 101s. Subject to D.D.A. Regulations.

CYCLOBARBITONE.—Less than 25 kilos: B.P.C. 73s. per kilo. CALCIUM, 85s.

DICOPHANE (DDT).—Prices are as follows:—1-cwt. lots 3s. 2d. per lb.; 5-cwt. 3s. 0½d.; 1-ton, 2s. 11d.

DIPHENAN.—Prices range from 55s. 3d. (56-lb.) to 63s. (1-lb.) per lb.

EPHEDRINE.—ALKALOID, is nominally 6s. 6d. per oz.; SULPHATE, 4s. and HYDROCHLORIDE, 3s. 3d. per oz.

ERGOMETRINE.—For 20-gm. lots the price of the MALEATE, B.P. is £17 10s. per gm. and the TARTRATE, £16 5s. per gm.

GLYCERIN.—Rates for pharmaceutically pure (s.g. 1.2627) are as follows:—

Annual purchases or spot lots of	Under 1 cwt.	1 cwt.		5-cwt.		1 ton and under 1 ton		5 tons and under 25 tons		
		s.	d.	s.	d.	s.	d.	s.	d.	
TINS										
Per cwt.										
14-lb.	241	0	236	6	232	6	228	0	225	6
28-lb.	239	0	234	6	230	6	226	0	223	6
56-lb.	—	230	6	226	0	222	0	219	6	
DRUMS										
1-cwt.	235	0	214	6	210	6	206	0	204	6
2½-cwt.	—	211	6	208	0	203	6	202	0	
5-cwt.	—	—	207	6	203	0	201	6	201	0
10-cwt.	—	—	206	0	202	6	201	0	201	0

For 25 tons and upwards the price is from 200s. to 225s. 6d. as to containers. Bulk deliveries in tank wagons from 197s. 6d. to 198s. 6d. Technical grade glycerin, s.g. 1.2627, is 5s. per cwt. less than the above.

HEXOBARBITONE.—In 25-kilo lots or over the price is 115s. per kilo.

HOMATROPINE.—Current rates (per oz.) for 16-oz. lots are now: ALKALOID, 30s. 6d.; HYDROBROMIDE, 24s. 6d.; HYDROCHLORIDE, 28s. 6d.; METHYLBROMIDE, 25s. 6s. 1-oz. rates are 1s. 6d. per oz. above those rates.

HYPOPHOSPHITES.—Prices per lb. are:—

	7 lb.		28 lb.		1 cwt.	
	s.	d.	s.	d.	s.	d.
CALCIUM, B.P.C.	6	9	6	4	5	11
IRON, B.P.C.	13	9	13	3	12	9
MAGNESIUM ..	11	6	11	1	10	8
MANGANESE, B.P.C.	13	11	13	5	12	11
POTASSIUM, B.P.C.	9	3	8	10	8	5
SODIUM, B.P.C.	7	7	7	2	6	9

ICHTHAMMOL.—B.P. is from 2s. to 2s. 6d. per lb. in 1-cwt. lots as to origin and container.

IRON SALTS.—GLUCONATE, B.P.C., is 6s. 3d. per lb. in 1-cwt. lots; SULPHATE, B.P. crystals are 9½d. per lb. in 28-lb. lots; 1-cwt. is 57s. 6d. per cwt. and 5-cwt., 52s. 6d. per cwt.; SULPHATE EXSICCATED is 1s. 5d. per lb. for 28-lb., 1-cwt., 123s.; 5-cwt., 113s. per cwt., 1-cwt. fibre kegs free. Other packages extra. PHOSPHATE, B.P.C., 28-lb., 3s. 6d. per lb.; 1-cwt., 3s. 3d. PHOSPHATE, SACCHARATED, B.P.C., 28-lb. lots are 3s. 9d. per lb.; 1-cwt., 3s. 6d. OXIDE, RED PRECIPITATED, B.P.C., 1949, 1-cwt., 2s. 1d. per lb.; CARBONATE, SACCHARATED, B.P.C., 1949, 28-lb., 3s. 3d.; 1-cwt., 3s. AMMONIUM CITRATE, scales, 6s. 6d. per lb.; granular, 5s. 9d. AMMONIUM SULPHATE, 1-cwt., 1s. 10d. per lb. QUININE CITRATE, 2s. 1d. per oz. in 100-oz. tin.

METHADONE HYDROCHLORIDE.—Price is from 2s. to 2s. 6d. per gm. as to quantity. Subject to D.D.A. Regulations.

METHYL PHENOBARBITONE.—B.P. is 95s. per kilo for less than 25-kilo lots.

OPIATES.—Home trade prices (per oz.) are as follows (subject to D.D.A. Regulations):—

	35 oz. and over		Under 35 oz.	
	s.	d.	s.	d.
CODEINE				
PHOSPHATE ..	41	0	42	0
HYDROCHLORIDE ..	47	3	48	3
SULPHATE ..	47	3	48	3
ALKALOID ..	54	0	55	0
MORPHINE				
ACETATE ..	50	0	51	0
HYDROCHLORIDE ..	50	0	51	0
SULPHATE ..	50	0	51	0
TARTRATE ..	60	0	61	0
ALKALOID ..	61	3	62	3
ETHYL MORPHINE				
HYDROCHLORIDE ..	54	0	55	0
ALKALOID ..	63	3	64	3
DIAMORPHINE				
HYDROCHLORIDE ..	54	9	55	9
ALKALOID ..	59	9	60	9

OXALIC ACID.—Manufacturers' rates for 1-ton lots are from £128 10s. per ton, delivered in free kegs.

PENTOBARBITONE SODIUM.—Minimum 25-kilo lots are 125s. per kilo.

PETHIDINE HYDROCHLORIDE.—B.P. 100-gm. lots, 100s. Subject to D.D.A. regulations.

PHENOBARBITONE.—Under 50-kilo lots are 50s. per kilo and SODIUM, 55s. 6d.

PROCAINE HYDROCHLORIDE.—100-kilo lots are about 45s. per kilo.

PYROGALLIC ACID.—Pure crystals are 22s. 6d. per lb. in 1-cwt. lots; resublimed, 24s. 3d.

QUININE.—Makers' rates for 1,000-oz. lots are now:—SULPHATE, B.P.C., 1932, 1s. 10d. per oz. SULPHATE, B.P.C., 1953, 2s. 0½d.; BISULPHATE, 1s. 10d.; DI-HYDROCHLORIDE, 2s. 4½d.; HYDROCHLORIDE, 2s. 6½d.; ETHYL CARBONATE, 4s. 3d.

SACCHARIN.—In lots of 1 lb. and over B.P.C. powder is quoted at 99s. 10d. per lb., the SODIUM SALT is 80s. 10d. per lb. Prices include duty and carriage.

STRYCHNINE.—Per oz.; ALKALOID, crystals, 8s. 3d. HYDROCHLORIDE, 8s. 4d.; SULPHATE, 7s. 3d.; NITRATE, 8s. 9d., all for 100-oz. lots in free containers.

SULPHACETAMIDE.—Quotations (per lb.) for 1-cwt. lots are 24s. 6d. The SODIUM derivative is 30s.

SULPHAGUANIDINE.—Manufacturers' rates for 1-cwt. lots are about 11s. per lb.

SULPHANILAMIDE.—Manufacturers' rates for 1-cwt. lots are 5s. 9d. per lb.

SULPHATHIAZOLE.—Price (per lb.) for 1-cwt. lots is 16s. 6d.

TEREBINTH—B.P. is 2s. 3d. per lb.

### Crude Drugs

AGAR.—Kobe is 10s. 9d. per lb., duty paid; for shipment, 8s. 11d.

BALSAMS.—Quotations per lb. are:—CANADA: Spot, 25s. COPAIBA: Para from 8s. to 10s., duty paid. PERU: Spot, 11s. TOTU (genuine as imported): 24s.; B.P., 17s.

BENZOIN.—Sumatra No. 1 block on the spot is 520s. to 540s. per cwt. (475s., c.i.f.).

BUCHU.—Spot rounds are 6s. 3d. per lb. and shipment, 5s. 9d., c.i.f.

CALAMUS.—Root is quoted at 1s. 4d. per lb., c.i.f.

CAMPHOR.—B.P. POWDER is from 5s. per lb., duty paid. TABLETS,  $\frac{1}{4}$  oz., are 6s., in bond.

CAPSICUMS.—East African are from 150s. to 200s. per cwt. on the spot.

CARDAMOMS.—Aleppo greens are 15s. per lb. on the spot; September-October shipment, 14s. 3d., c.i.f. No. 1 seed for shipment, 20s. 6d., c.i.f., spot, 24s. 3d.

CASCARA.—Spot 1957 peel, 260s. per cwt. 1958 peel, shipment, 205s., c.i.f.

CASSIA.—Selected whole bark for shipment is 220s. per cwt., c.i.f., and extra-selected broken, 210s., c.i.f. Spot: Whole 235s. in bond nominal. *C. fistula*, 110s. per cwt.

CHERRY BARK.—Thin natural is 1s. 5d. per lb., and rossed is 1s. 11d.

CHILLIES.—Spot Mombasa are 185s. per cwt. and Zanzibar, 225s.

CINNAMON.—Ceylon for shipment (c.i.f.) per lb., OOOO, 7s. 3 $\frac{1}{2}$ d.; OOO, 6s. 11 $\frac{1}{2}$ d.; OO, 6s. 9 $\frac{1}{2}$ d.; seconds, 5s. 4 $\frac{1}{2}$ d.; featherings, 1s. 10d.; quillings, 4s. 4d.; chips, 1s.

CLOVES.—Zanzibar on the spot are 3s. 2 $\frac{1}{4}$ d. per lb.; shipment sold at 2s. 8 $\frac{1}{2}$ d., c.i.f.

COCHINEAL.—Silver-grey Peruvian quoted 6s. 6d. per lb., c.i.f.; Canary Isles black-brilliant, 20s. 6d., spot.

COCHILLANA.—Bark is 1s. 8d. per lb. on the spot.

COLOCYNTH PULP.—Spot, 3s. per lb.

DIGITALIS LEAF.—Purpurea (1956 crop) is offered at 1s. 2 $\frac{1}{2}$ d. per lb., c.i.f.; 1957 crop, 2s. 6d. to 2s. 7d., c.i.f.

ERGOT.—Portuguese is 5s. per lb., c.i.f. for prompt shipment and 6s. spot nominal; American, 5s. 9d., spot.

FRANGULA.—Spot is 105s. per cwt.

GENTIAN.—French is 170s. per cwt. on the spot.

GINGER.—African, 102s. 6d. per cwt. on the spot; new crop for shipment, 92s. 6d., c.i.f. Jamaican No. 3 on the spot is 280s. per cwt.

GRINDELIA.—Herb is quoted at 2s. 6d. per lb.

GUM ACACIA.—Kordofan cleaned sorts are 140s. per cwt. on the spot; September-October shipment, 128s. 6d., c.i.f.

HONEY.—Australian light-amber is 115s. 6d. to 120s. 6d. and medium amber 102s. 6d. to 107s. 6d. Argentine, 132s. 6d. to 137s. 6d.; Jamaican 135s. to 140s.; New Zealand clover, 160s. to 170s.; all per cwt. on the spot.

HYDRASTIS.—Spot 31s. per lb.; forward, from 28s. to 29s. 6d., per lb., c.i.f.

HYOSCYAMUS.—Dutch leaves (*niger*), are 1s. 6 $\frac{1}{2}$ d. per lb., c.i.f., prompt shipment.

IPECACUANIA.—Matto Grosso, 58s. per lb., spot, limited supplies; shipment, no offers. Colombian quoted at 56s., c.i.f.; Costa Rican, no offers.

KARAYA.—No. 1 gum on the spot is quoted at 235s. per cwt. and No. 2 at 165s.

KOLA NUTS.—Jamaican are offered at about 8d. per lb. spot, and 7d., c.i.f. African 5d. to 5 $\frac{1}{2}$ d. spot and 4d., c.i.f.

KRAMERIA.—Root is quoted at 90s. per cwt.

LANOLIN.—ANHYDROUS, B.P., is from 170s. to 175s. per cwt. in 1-ton lots and HYDROUS, B.P., 150s., free drums, delivered.

LEMON PEEL.—Spot is offered at 5s. per lb.

LIQUORICE.—Natural root: Persian on the spot is 47s. 6d. for shipment, 42s. 6d., c.i.f., per cwt. Block juice: Anatolian, 200s. to 210s. per cwt., as to quantity. Italian stick from 310s. to 476s. per cwt. Spray-dried extract, 2s. 10 $\frac{1}{2}$ d. per lb.

LOBELIA HERB.—Spot offers are from 3s. 6d. per lb. as to origin. Dutch, 3s. 3d., c.i.f. for shipment.

MACE.—Whole on the spot is from 23s. 6d. per lb.

MENTHOL.—Chinese is 52s. 6d. per lb., duty paid and 47s. 6d., c.i.f.; Brazilian, spot, 35s. 6d., duty paid, shipment, 33s., c.i.f. Formosan for shipment, 36s. 6d., c.i.f.

ORANGE PEEL.—West Indian bitter quarters are 11d. per lb.; Spanish, 1s. 3d. to 1s. 6d., as to quality; thin-cut Tripoli, 2s. 3d.

ORRIS ROOT.—Florentine is 330s. per cwt. Short at origin.

PAPAIN.—Shipment (c.i.f.) value is 25s. per lb. for East African grade one.

PIMENTO.—Spot value is 585s. per cwt.

PODOHYLLUM.—*Emodi*: Spot not quoted; new crop awaited. *Peltatum*, on the spot, 4s. 3d. per lb.; shipment, 450s., c.i.f.

PYRETHRUM.—Extract, minimum 25 per cent. w/w pyrethrins, is 72s. per lb.

QUASSIA.—Chips on spot are offered at 55s. per cwt., no shipment offers.

QUILLAIA.—Spot offers of whole bark at 165s. per cwt.; cut, 197s. 6d.; crushed, 190s. Whole for shipment, 115s., c.i.f.

RAUWOLFIA.—*Canescens*, 2s. per lb., c.i.f.; *Vomitoria*, 2s. 3d., c.i.f.; *Serpentina*, 6s., c.i.f. asked.

RHUBARB.—Chinese small to medium offering from 6s. to 7s. 6d. per lb., as to quality. Best grades not available on spot.

SAFFRON.—Spanish is quoted at 230s. per lb.

SARSAPARILLA.—Jamaican native red on the spot is 2s. 6d. per lb. Shipment, not offering.

SEEDS.—(Per cwt.).—ANISE.—Spanish, 165s., duty paid. CARAWAY.—Dutch firm at 87s. 6d., duty paid. CELERY.—Indian offered at 180s. and 140s., c.i.f. CORIANDER.—Spot, Moroccan at 60s., and Polish, 52s. 6d., both duty paid. CUMIN.—Spot, Cyprian, 235s.; Iranian, 220s., in bond and 240s., duty paid. DILL.—Sellers of Indian at 70s., spot. FENNEL.—Indian, 175s.; Chinese, 157s. 6d., duty paid. FENUGREEK.—Moroccan in poor demand at 46s., duty paid. MUSTARD.—English is 75s. for medium quality only.

SENEGA.—Spot is 14s. per lb.; shipment, 13s., c.i.f.

SENNA.—*Tinnevelly* LEAVES, prime No. 1, 1s. 5d. per lb., f.a.q., No. 3, 10d. PODS, manufacturing short at 1s. 6d. and hand-picked, 2s. 1d. to 2s. 4d. Alexandria pods: Manufacturing, offered from 1s. 6d. with hand-picked from 5s. to 6s.

SHELLAC.—F.O.T.N. 180s. per cwt., F.O. No. 1, 205s.; fine orange, 220s. to 275s.

TONQUIN BEANS.—Para on the spot are offered at 8s. 3d. per lb. Shipment, 7s. 6d., c.i.f.

STRAMONIUM.—Indian LEAVES are 70s. per cwt., and European 80s. on the spot.

STROPHANTHUS.—*Kombé* on the spot is 8s. per lb. for the 100 per cent. *Gratus* is unobtainable on the spot.

WAXES.—(Per cwt.).—BEES'—Dar-es-Salaam, spot, 525s., shipment, 475s., c.i.f. Abyssinian, spot, 470s. in bond; shipment, 445s., c.i.f. Benguela spot, 520s., duty paid; shipment, 460s., c.i.f. CANDELILLA.—Spot, 460s. CARNAUBA.—Fatty grey, spot, 560s.; for shipment, 540s., c.i.f. Prime yellow, spot, 970s.; shipment, 945s., c.i.f.

### Essential and Expressed Oils

ALMOND.—British oil is 9s. per lb. Moroccan, 6s. 9d., in bond.

AMBER.—Rectified on the spot is 1s. 6d. per lb.

ANISE.—Chinese, 8s. per lb., spot; shipment, 7s. 9d., c.i.f.

BAY.—West Indian is 12s. 6d. per lb. on the spot.

BERGAMOT.—Spot supplies are from 86s. 6d. per lb.

BOIS DE ROSE.—Brazilian is 18s. 6d. per lb. on the spot and 16s. 6d., c.i.f.

CADE.—Spanish is 2s. 6d. per lb. for drum lots.

CAJUPUT.—Spot supplies are from 10s. per lb.

CALAMUS.—Spot quotations are 62s. 6d. per lb.

CAMPHOR, WHITE.—Chinese is 1s. 10 $\frac{1}{2}$ d. per lb., in bond.

CANANGA.—Spot is from 47s. 6d. to 50s. per lb.

CARAWAY.—English-distilled is offered at 55s. and imported 26s. 6d. per lb.

CARDAMOM.—Price per lb. is from 350s. for English-distilled and 267s. 6d. for imported.

CASSIA.—Spot is 13s. 3d. per lb.; shipment, 13s. 4 $\frac{1}{2}$ d., c.i.f.

CASTOR.—Home-produced B.P. oil on the spot is £143 per ton naked ex mill (2-ton lots).

CITRONELLA.—Ceylon, spot is 4s.; shipment, 3s. 5 $\frac{1}{2}$ d., c.i.f. Formosan, prompt shipment, 3s. 8 $\frac{1}{2}$ d. (spot nominally 4s. in bond).

CLOVE.—Madagascar leaf, 7s. 3d. per lb., duty paid nominal; shipment, 6s. 4d., c.i.f. Rectified 87-88 per cent., 9s. 3d. Distilled bud oil, English, B.P., 26s. 6d. to 27s. 6d.

GERANIUM.—Bourbon is 135s. per lb. on the spot and 132s. 6d., c.i.f. Algerian, 100s.

ORANGE.—Spot quotations of sweet oil include Floridian at 12s. 6d. per lb.; Californian, 15s.; West Indian, 12s.; West African, 24s. 6d.; Israeli, 16s. 6d. For prompt shipment, Californian cold-pressed U.S.P., 16s. 9 $\frac{1}{2}$ d., c.i.f.; distilled, 6s. 5d., c.i.f. Terpenless is 200s. per lb., spot; bitter around 27s. as to sample.

PATCHOULI.—Penang is 25s., duty paid and 21s., c.i.f. per lb.

PEPPERMINT.—*Arvensis*: Chinese is 24s. 9d. per lb. on the spot nominal and 22s., c.i.f. Brazilian, 8s. 3d., spot and 7s. 9d., c.i.f. Formosan, 15s. 3d., spot; new-crop for September shipment, 12s. 6d., c.i.f. *Piperita*: Italian "Mitcham" type, from 42s. 6d. to 50s.; American, 27s. 6d. to 30s., as to origin.

SANDALWOOD.—Mysore offered from 77s. 6d. to 80s. per lb. as to source. East Indian, 80s., spot.

VETIVERT.—Spot is currently at about 87s. 6d. per lb.

### UNITED STATES REPORT

NEW YORK, SEPTEMBER 23: In FINE CHEMICALS domestic synthetic CAMPHOR technical and U.S.P. remain steady in price but natural powdered material from Formosa was firmer with quotations ranging from 65 cents to 70 cents per lb. While an upturn was reported in demand for CRUDE DRUGS in some quarters trade generally was sluggish. Price movements in ESSENTIAL OILS included an advance in CLOVE and reductions in CANANGA and OLEO-RESIN GINGER. White Formosan CITRONELLA and LEMONGRASS continue to display a soft tone there were several strong spots in the market, including SPEARMINT, GERANIUM and VETIVERT.

## WORLD TRADE

**India and Export Incentives.** — The Indian Government has been urged to consider a remission of sales tax for (among other things) shellac, spices and vegetable oils. A proposal that commercial banks should re-discount bills at a lower rate of interest is also being scrutinised.

**South African Coinage Proposal.** — The decimalisation of the South African coinage is recommended in a report of the Decimal Coinage Commission published on September 10. A monetary unit to the value of 10s. divided into ten silver shillings and 100 bronze cents would replace the present system, if the report is acted on by the Government. The commission recommends legislation next year to introduce the changes and that there should be a two-year conversion period during which the present currency would remain in force. The five big banks and altogether fifty-six out of seventy-five organisations who expressed views were in favour, while machine companies were practically unanimous in supporting the scheme.

**European Transport Suggestion.** — Professor W. Hallstein (president of the Euromarket Commission) discussed European transport policy at a meeting in Rotterdam on the occasion of "Rotterdam harbour day" on September 13. Professor Hallstein said that a common transport policy could be based on the following five points: The formation of tariffs in direct connection with costs; the abolition of subsidies; a free choice of transport for the consumer; the development of an extensive investment programme and the solution to the problems of support-costs in transport. Professor Hallstein stressed that the development of a common transport policy should be linked with the development of the European Common Market.

## TRADE MARKS

APPLICATIONS ADVERTISED  
BEFORE REGISTRATION

From the "Trade Marks Journal," September 10

For photographic, cinematographic and optical apparatus and instruments, and parts and fittings (9)

PALOMA, 774,757, RITTRECK, 774,759, by Mayfair Photographic Suppliers, London, N.W.3.

For electric apparatus for radio therapy; and hearing aids for the deaf (10)

RADARMED, 777,212, by Deutsche Elektronik G.m.b.H., Berlin-Wilmersdorf, Germany.

For hair nets (26)

MAY FAYRE, 761,976, by A. Burnet & Co., Ltd., London, W.1.

From the "Trade Marks Journal," September 17

For chemical substances derived from blood for use in diagnosis by means of analysis in the laboratory (1)

ACUTEL, 762,481, by Ortho Pharmaceutical Corporation, Raritan, New Jersey, U.S.A.

For sorbitol for industrial use (1)

SORBEX, 770,249, by Dr. Hefti, Ltd., Zurich, Switzerland.

For suspensions of chemical compounds in solvents for application to photographic and cinematographic films to inhibit damage by scratching, abrasion, etc. (1)

PERMABASE, PERMAFILM, PERMAGNA, PERMA-NEW, 776,127-30, by Permafilm, Inc., New York, U.S.A.

For photographic chemical preparations (1)  
HYCON, 778,562, by May & Baker, Ltd., Dagenham, Essex.

For chemical substances for use in agriculture and horticulture (1)  
DIQUAT, 777,981, by Plant Protection, Ltd., Yalding, Kent.

For all goods (3)  
RIN, 775,373, by R. S. Hudson, Ltd., London, E.C.4.

For soaps, perfumes, non-medicated toilet preparations, preparations for the hair and dentifrices (3)  
SOOTY, 753,223, by Sooty Concessions, Ltd., London, E.C.4.

For pharmaceutical preparations for dental purposes (5)  
SAVLODENT, 776,804, by Imperial Chemical Industries, Ltd., London, S.W.1.

For medicated wine (5)  
Device with words TONIC AND RESTORATIVE SANATOGEN TONIC WINE, 777,633, by Genatosan, Ltd., Loughborough, Leics.

For aromatic substances for addition to industrial products to impart an odour (3)  
CALODORANT, 776,292, by Oronite Chemical Co., San Francisco, California, U.S.A.

For non-medicated toilet preparations and cosmetic preparations, all for dental purposes (3)  
SAVLODENT, 776,803, by Imperial Chemical Industries, Ltd., London, S.W.1.

For perfumes, non-medicated toilet preparations, essential oils, cosmetics and hair lotions (3)  
LIQUAPON, 778,435, by Wella Rapid, Ltd., London, N.W.1.

For laxatives (5)  
LAXATOSE, 765,046, by Tunnel Glucose Refineries, Ltd., London, S.E.10.

For ointments and salves, all being pharmaceutical preparations for external use in the treatment of rheumatism, sciatica, lumbago, bronchitis, stiff joints and muscular pains (5)

ELECTRIC BALM, 768,963, by Alexander Boyd & Co., Ltd., Lisburn, Northern Ireland.

For medicines for human use in the treatment of coughs, chronic bronchitis, pulmonary catarrh, asthma and laryngitis (5)

GLYCODINE, 769,950, by T. & H. Smith, Ltd., Edinburgh.

For veterinary preparations (5)  
SPOROVET, 772,118, by Parke, Davis & Co., Detroit, Michigan, U.S.A., and Hounslow, Middlesex.

For cattle medicines (5)  
PETTIFER'S D.C.2, 772,179, by Thomas Pettifer & Co., Ltd., Rydon, Rugby.

For all goods (5)  
NILDOL, 773,801, by Imperial Chemical Industries, Ltd., London, S.W.1. CYDACTONE, 778,338, LYMONTAL, 778,340, by Calmie, Ltd., Crewc, Ches. INVIRIN, 778,482, by Glaxo Laboratories, Ltd., Greenford, Middlesex.

For medicinal preparations containing pancreatic enzymes (5)

PANCREX, B775,069, by Paines & Byrne, Ltd., Greenford, Middlesex.

For pharmaceutical preparations for use in the treatment of cardiac disorders (5)

RYTHMOPAX, 775,657, by Clinical Products, Ltd., Richmond, Surrey.

For pharmaceutical preparations and substances (5)

EUBANA, 776,191, by Anglo-French Pharmaceuticals, Ltd., London, W.C.1. AGPROSOL, 777,003, by Agprolin, Ltd., Oldham, Lancs. ACTIPECT, 778,332, by the Wellcome Foundation, Ltd., London, N.W.1.

For pharmaceutical preparations in the nature of brilliantine for the treatment of the hair (5)

DERBALINE, 776,234, by Roberts Windsor Soap Co., Ltd., Windsor, Berks.

For insecticides (5)

BOP, 776,432, by the British Petroleum Co., Ltd., London, E.C.2. DEMOTAS, 778,500, by Samuel Wachman, London, N.16.

For pharmaceutical preparations for human and veterinary use (5)

BRONOPAX, 776,525, by Imperial Chemical Industries, Ltd., London, S.W.1.

For all goods, but not including infants' and invalids' foods, diabetic foods or medicated confectionery (5)

SALMATIX, 776,527, by Imperial Chemical Industries, Ltd., London, S.W.1.

For preparations for killing weeds (5)  
ATLAVAR, 777,759, by Chipman Chemical Co., Ltd., London, S.W.1.

For insecticides, fungicides and weed-killing preparations (5)

DIQUAT, 777,982, by Plant Protection, Ltd., Yalding, Kent.

For pharmaceutical, veterinary and sanitary substances; infants' and invalids' foods; medical and surgical plasters; material prepared for bandaging; and disinfectants (5)

COLIFARMINA, 778,054, by Società Farmaceutici Italia, Milan, Italy.

## COMING EVENTS

Items for inclusion under this heading should be sent in time to reach the Editor not later than first post on Wednesday of the week of insertion.

### Monday, September 29

BIRKENHEAD AND WIRRAL BRANCH, PHARMACEUTICAL SOCIETY, Central hotel, Birkenhead, at 7.45 p.m. Mr. F. Bradley Dixon on "Sand's o' Dee."

ROMFORD BRANCH, PHARMACEUTICAL SOCIETY, Un corn hotel, Gidea Park, at 7.45 p.m. Film show by Burroughs Wellcome & Co.; reports on 1958 British Pharmaceutical Conference.

### Wednesday, October 1

WEST MIDDLESEX CHEMISTS' ASSOCIATION and BRANCH, Oldfield hotel, Greenford, at 6.30 p.m. Annual dinner and dance.

### Thursday, October 2

DURHAM COUNTY BRANCH, PHARMACEUTICAL SOCIETY, Waterloo hotel, Old Elvet, Durham City, at 7.45 p.m. Mr. J. Wotherspoon on "Colour Photography."

GUILDFORD BRANCH, PHARMACEUTICAL SOCIETY, Prince of Wales, Guildford, at 7.30 p.m. Debate.

HARROW BRANCH, PHARMACEUTICAL SOCIETY, oak hall, Baptist Church, College Road, at 8 p.m. Film show by Burroughs Wellcome & Co.

### Friday, October 3

FINE CHEMICALS GROUP, SOCIETY OF CHEMICAL INDUSTRY, 14 Belgrave Square, London, S.W.1, at 6.30 p.m. Dr. B. A. Hems (Glaxo Laboratories, Ltd.) on "Cortisone from Hecogenin."

MERSEYSIDE BRANCH, NATIONAL ASSOCIATION OF WOMEN PHARMACISTS, 17 Bluecoat Chambers, School Lane, Liverpool, 1, at 7.45 p.m. President's night.

SOUTH-WEST LONDON CHEMISTS' ASSOCIATION, Lambeth town hall, Brixton Hill, London, S.W.2, at 8 p.m. Dr. H. Davis (chief pharmacist, Ministry of Health) on "The March of Proprietaries."

### Saturday, October 4

NATIONAL CHAMBER OF TRADE, Leamington Spa. Autumn trade conference. (Until October 7.)

NORTH OF ENGLAND SECTION, SOCIETY FOR ANALYTICAL CHEMISTRY, City Laboratories, Mount Pleasant, Liverpool, 3, at 2.15 p.m. Discussion on "Laboratory Balances."

### Advance Information

INCORPORATED SALES MANAGERS' ASSOCIATION, Royal Festival Hall, London, S.E.1, on October 20. Conference on "Alerting Management for a Salesmanship Economy."

INDUSTRIAL WELFARE SOCIETY, 48 Bryanston Square, London, W.1, October 14-15. Course for office managers and supervisors. A paper on "Method Study in the Office" is being given by Mr. E. W. Ivey (clerical work study officer, Wellcome Foundation, Ltd.). Fee for the course is £6 6s. (£5 5s. to members of the I.W.S.).

ROYAL INSTITUTE OF CHEMISTRY, St. Ermin's hotel, Caxton Street, London, S.W.1. at 7 p.m. on October 31. Annual dinner and dance. Ticket (price 30s.) available from Miss E. J. Beeching, 16 Chalvey Park, Slough, Bucks.

## COMMERCIAL TELEVISION

PROGRAMME details are given to enable chemists to put in linking-up displays if they wish. Notice given is as far in advance of the programme date as can be guaranteed by the broadcasting companies. Where known, the number of appearances of the product during the week is shown in parentheses.

### October 5-11

#### LONDON

Airwick (3). Alka-Seltzer (2). Amami wave set (3). Aspro. Beecham's powders (4). Bristow's lanolin shampoo (2). Cadum soap. Carter's little liver pills (3). Camay (2). Cutex "Stay Fast" lipstick (2). Damaskin. Delrosa (2). Digestif Rennies. Diuromil. Euthymol tooth-paste (1). French's bird food (2). Fresh-Aire (2). Gale's honey (2). Germolene. Gillette razors and blades (2). Gleem tooth-paste (2). Heath and Heather (2). Horlicks (2). Iron Jelloids (2). Knight's Castile soap (8). Lantigen B. Loxene shampoo (3). Mac throat sweets. Macleans tooth-paste (4). Milk of Magnesia (2). Moorland's indigestion tablets. Pepsodent tooth-paste (5). Phensic. Phosferine. Phyllosan (2). Pond's toilet preparations. Punch and Judy tooth-paste. Rinsestand pastilles. Rosemary shampoo (2). Sebbix shampoo. Silvirkirin pure, shampoo (2), hair cream (3). Supavite (3). Sprinkleen (1). Thru (2). Trojan soap pads (1). Trugel (3). Valderma (1). Veno's cough cure (4). Vosene shampoo (3). "Water Lilies" shampoo (2).

### MIDLAND

Airwick (3). Alka-Seltzer. Amami wave set (3). Aspro. Atkinson's "Skin Deep" (2). Beecham's pills (3), powders (4). Bristow's lanolin shampoo (3). Cadum soap. Carter's little liver pills (3). Camay (3). Cutex "Stay Fast" lipstick. Delrosa (2). Diuromil. French's bird food (2). Fresh-Aire (2). Gillette razors and blades (2). Gleem tooth-paste. Horlicks (2). Knight's Castile soap (7). Loxene shampoo (3). Mac throat sweets. Milk of Magnesia tablets (2). Moorland's indigestion tablets (2). Pepsodent tooth-paste (5). Phensic (5). Phosferine. Phyllosan (3). Punch and Judy tooth-paste. Sanatogen. Setlers (4). Sebbix shampoo. Silvirkirin shampoo (2), hair cream (2). Supavite (4). Thru. Trojan soap pads. Trugel (3). Valderma (2). Veno's cough cure (4). Vosene shampoo (4). "Water Lilies" shampoo (3).

## C. & D. WEEKLY LIST OF PRICES

**A = Advanced; R = Reduced; I.R.P. = Inclusive Retail Price; \* = Tax 30 per cent.; † = Tax 60 per cent.**

### BENGER LABORATORIES, LTD. (from October 1)

	Each	I.R.P.
Notensil tablets 10 mgm.	30 2 6	3 9 R
	1,000 60 0	90 0 R
25 mgm. 1,000	100 11 0	16 6 R
	100 0	150 0 R

### GLAXO LABORATORIES, LTD. (from September 22)

	32	35 0	52 6 R
Biotexin tablets	100	100 0	150 0 R

### REMINGTON RAND, LTD. (from October 1)

Remington pre-shave lotion†	7 0 A
after-shave lotion†	7 0 A
powder stick†	7 0 A

### WARD, BLENKINSOP & CO., LTD. (from October 1)

	100	8 3 R
Adaprin tablets	500	33 0 R

Ekammon tablets:— dispensing packs	500	30 0 R
	1,000	57 0 R
Penotrance applicator set		8 3 A
disposable applicators	50	9 3 A

### PURCHASE TAX EXEMPTIONS

#### ABBOTT LABORATORIES, LTD.

	100	25 0	37 6 R
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#### BAYER PRODUCTS, LTD.

Panadol tablets	12	2 3 R
	20	3 3 1 R
	100	13 6 R
	500	60 9 R
	2,500	288 0 R

#### IMPERIAL CHEMICAL INDUSTRIES, LTD., PHARMACEUTICALS DIVISION

	Doz.	
Tenormal tablets 5 mgm.	50	90 0 II 3 R
		Each
	500	65 0 97 6 R
		Doz.
10 mgm. 50	160 0	20 0 R
		Each
	500	116 8 175 0 R

tone (2). Horlicks (3). Iron Jelloids (3). Knight's Castile soap (7). Loxene hair oil, shampoo (3).

Mac throat sweets. Milk of Magnesia tablets (2). Moorland's indigestion tablets (2). Pepsodent tooth-paste (6). Phensic (5). Phosferine. Phyllosan (3). Pond's toilet preparations.

Sanatogen. Sebbix shampoo (2). Silvirkirin shampoo (2), hair cream (2). Supavite (3). Thru (3). Trojan soap pads. Trugel (3). Veno's cough cure (4). Vosene shampoo (4). "Water Lilies" shampoo.

### NORTH

Airwick (3). Alka-Seltzer. Amami wave set (4). Aspro (2). Beecham's pills (4), powders (4). Bristow's lanolin shampoo (3). Cadum soap. Camay (2). Cephos (4). Cutex "Stay Fast" lipstick. Dabitoft. Delrosa rose-hip syrup (2). Dento (2). Dr. Wernet's powder.

Euthymol tooth-paste. French's bird food (2). Fresh-Aire (2). Gillette razors and blades (2). Gleem tooth-paste. Horlicks (2). Knight's Castile soap (7). Loxene shampoo (3).

Mac throat sweets. Macleans tooth-paste. Milk of Magnesia tablets (2). Moorland's indigestion tablets (2). Pepsodent tooth-paste (5). Phensic (5). Phosferine. Phyllosan (3). Punch and Judy tooth-paste. Sanatogen. Setlers (4). Sebbix shampoo. Silvirkirin shampoo (2), hair cream (2). Supavite (4). Thru. Trojan soap pads. Trugel (3). Valderma (2). Veno's cough cure (4). Vosene shampoo (4). "Water Lilies" shampoo (3).

### SCOTLAND

Airwick (3). Ajax. Alka-Seltzer (2). Amami wave set (5). Atkinson's "Skin Deep" (2). Beecham's pills (3), powders (4). Bristow's lanolin shampoo (2). Cadum soap. Camay soap. Dabitoft. Delrosa rose-hip syrup (2). Diuromil (2).

Euthymol tooth-paste. French's bird food (2). Gillette razors and blades (2). Gleem tooth-paste.

past. Horlicks (2). Knight's Castile soap (8). Loxene shampoo (3).

Mac throat sweets (2). Macleans tooth-paste (2). Milk of Magnesia (2). Moorland's indigestion tablets. Palmolive soap. Pepsodent tooth-paste (8). Phensic (5). Phosferine. Phyllosan (3). Sebbix shampoo. Silvirkirin pure, hair cream (2). Sprinkleen. Thru. Trugel (2). Vosene shampoo (4). "Water Lilies" shampoo (2).

### WALES

Airwick (3). Ajax. Alka-Seltzer. Beecham's pills (3), powders (4). Bristow's lanolin shampoo (4). Cadum soap. Delrosa rose-hip syrup (2). Digestif Rennies (3). Diuromil. Dr. Wernet's powder.

Euthymol tooth-paste. French's bird food (2). Fresh-Aire. Germolene (4). Gillette razors and blades (2). Gleem tooth-paste. Hilton (2). Horlicks (2). Knight's Castile soap (6). Loxene shampoo (3).

Mac throat sweets. Macleans indigestion tablets. Macleans tooth-paste. Milk of Magnesia, Moorland's indigestion tablets. Palmolive soap. Pepsodent tooth-paste (9). Phensic (5). Punch and Judy tooth-paste.

Sebbix shampoo. Silvirkirin pure, shampoo (2), hair cream (2). Thru. Trojan soap pads. Trugel (3). Veno's cough cure (4). Vosene shampoo (3). "Water Lilies" shampoo (2).

### SOUTH

Airwick (3). Amami wave set (3). Cadum soap. Camay (2).

French's bird food (2). Gillette razors and blades (2). Gleem, Horlicks (2). Knight's Castile soap (7). Loxene shampoo (3).

Milk of Magnesia (2). Moorland's indigestion tablets. Palmolive soap. Pepsodent tooth-paste (4).

Silvirkirin shampoo, hair cream (2). Trugel. Valderma (6). Vosene shampoo (3). "Water Lilies" shampoo (2).

### P.A.T.A. LIST

(Alterations notified this week by the Proprietary Articles Trade Association.)

#### ADDITIONS TO THE LIST

**HORLICKS, LTD.**, corrected note!  
Horlicks chocolate-flavoured Doz.  
food drink 6 oz. 27 2 2 11  
12 oz. 48 0 5 0

**MILLER OF GOLDEN SQUARE, LTD.**, Nicobrevin capsules\* 140 0 21 0

#### NEW PRODUCTS AND PACKS

**BOOTS PURE DRUG CO., LTD.**, Strepsils lozenges 24 2 6

**GILLETTE INDUSTRIES, LTD.**, Gillette razor travel set 13 6

**GLAXO LABORATORIES, LTD.**, Invirin vaccine Each

1-mil ampoule 7 6 10 0

6 42 0 56 0

Predsol lotion 0.1 per cent. 20 mils 5 0 6 8

ointment No. 1 0.25 per cent. 5 gm. 3 0 4 0

15 gm. 7 6 10 0

No. 2 0.25 per cent. 5 gm. 3 0 4 0  
15 gm. 7 6 10 0

Predsol-N ointment No. 1 0.25 per cent. 5 gm. 3 9 5 0  
15 gm. 9 0 12 0

ointment No. 2 0.25 per cent. 5 gm. 3 9 5 0  
15 gm. 9 0 12 0

**Haemophilus Influenzae** vaccine vial 10 mils 6 4 8 6

Staphylococcus toxoid vial 5 mils 3 9 5 0

**GOYA, LTD.**, Beauty All Day† 3 3  
Beauty base† 3 3

**ERNEST JACKSON & CO., LTD.**, Jackson's worm chocolates formula "P"\*\* 12 2 6 5 0

**ELI LILLY & CO., LTD.**, Telmid tablets\* 100 mgm. 15 6 4 11 5  
100 29 4 52 10

**MORNY, LTD.**, Dare perfume† 5 0

**ROCHE PRODUCTS, LTD.**, Redoxon tablets 1 gm. 10 6 9

**E. SALLIS, LTD.**, Eesimesh seamless nylon net surgical stockings pair 40 0

**SOLO ORCHARDS, LTD.**, GB health drink 3 6

**TRUFOOD, LTD.**, Spoonfoods golden plums with cereal and honey 101

**UPJOHN OF ENGLAND, LTD.**, Albamycin T tablets 16 44 0  
100 264 0

**WILLIAM R. WARNER & CO., LTD.**, Biomydrin nasal spray Doz.

42 6

**NEW ANTACID**  
**supersedes all others**  
**Satisfies all Criteria for**  
**the IDEAL ANTACID**

# **ACTAL**

TRADE MARK

sodium polyhydroxyaluminium  
monocarbonate hexitol complex

has all the effectiveness of the best liquid antacid with the convenience of a tablet.

*All this from Bayer—and at very low cost.*

Latest comprehensive antacid study states :

The commonly available antacids have been tested by these techniques and appraised against these criteria.

- Carbonates, bicarbonates, and preparations containing them, e.g., Mixture of Magnesium Trisilicate, B.P.C., raise the pH too far and may cause classical alkalosis.
- Magnesium trisilicate, aluminium glycinate, aluminium phosphate, and certain antacids containing milk solids do not raise the pH adequately.
- Aluminium hydroxide gel controls pH at the desired level but shows marked variation in speed of action and, being a liquid preparation, is inconvenient in use while its palatability is not always acceptable. It may lose two-thirds or more of its reactivity when prepared in tablet form.

A new substance—a sodium polyhydroxyaluminium monocarbonate hexitol complex—is described. This appears to meet adequately all the criteria. It loses no antacid activity on drying and tabletting but still reacts about 2½ times as rapidly as the best Dried Aluminium Hydroxide Gel tested and over four times as rapidly as most samples.

ACTAL 1—2 tablets to be sucked when required.  
 Packs of 48, 250, 1,000 tablets (360 mg).

Retail price of 48 tablets 5/11d. inc. P.T.  
 Trade price 3/3d.

**BAYER PRODUCTS LTD.**  
 Eden Street, Kingston-upon-Thames, Surrey.  
 Associated exporting company  
**WINTHROP PRODUCTS LIMITED**



## *Sunshine and Warmth...* **for people of all ages**

So many people would feel all the better for the stimulating warmth and sunshine provided by Philips Health Lamps. For instance, when used on medical advice, these lamps are often remarkably successful in treating rheumatic complaints and debilitated conditions.

### **Philips Ultra-violet SUNLAMP** (Made in Holland)

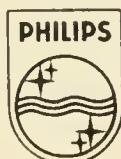
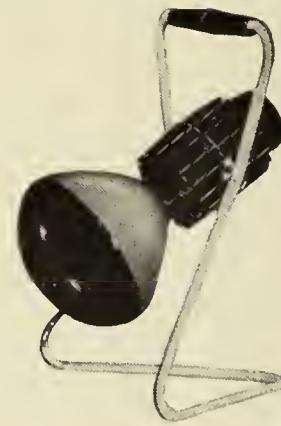
Philips Sunlamp gives the blessing of "Mountain sunshine". Doctors know the value of the right type of sunlight and do not hesitate to recommend the Philips Ultra-violet Sunlamp Price: £5.17.6d. (Including goggles.)



*A doctor's certificate must be presented when either of these lamps is purchased by the public.*

### **Philips Infra-red INFRAPHIL** (Made in Holland)

Philips Infraphil was installed in the medical centres at the last two Olympic Games. It is most valuable in alleviating the pain of arthritis, rheumatism and muscle-strain. Infraphil Infra-red lamp costs only £3.3s.0d. (as illustrated). De-luxe model "A" Price: £4.4s.0d.



### **PHILIPS ELECTRICAL LTD**

ELECTRICAL APPLIANCES DIVISION

Century House • Shaftesbury Avenue • London • W.C.2

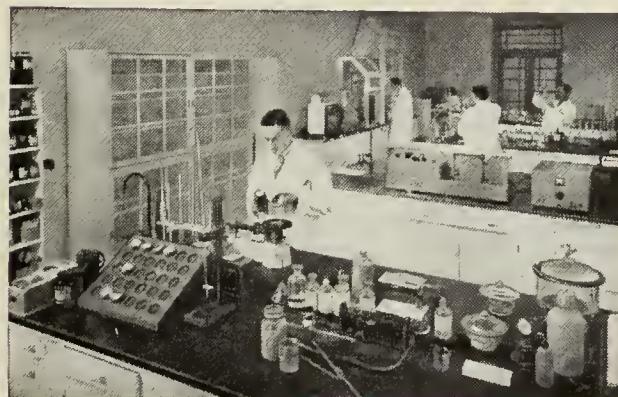
(INF3083)

# for the GREAT POTENTIAL MULTI-VITAMINS MARKET

**ONLY Scherer's**

**CAN PROVIDE THE COMPLETE  
CAPSULE SERVICE YOU DEMAND**

Multi-vitamins represent an important, rapidly growing market; they are essential to health. Only the large, *scientifically* controlled Scherer organisation is geared up to provide you with an unequalled, comprehensive and fully confidential production service—NOW.



**LABORATORY CONTROL**  
**Scherer's Triple Guarantee**

1. All materials analysed on delivery.
2. All mixes analysed before encapsulation.
3. All capsules analysed before despatch and protocols available on request.

**PROTECTION**

Hermetic sealing ensures the perfect, permanent protection, essential with many vitamins.

**YOUR SAFEGUARD**

Thousands, or millions, of gelatin capsules can be produced completely to *your* formula—in colours and shapes *exclusive to you*.

**ACCURACY**

Fill tolerance to within 1%.

**COMPLETE  
SERVICE**

The Scherer service means no capital outlay on your part; you supply your formula, and the encapsulated products, guaranteed, will be delivered to you complete—even strip packed if you wish.

**R. P. Scherer Ltd.**

*can encapsulate most pharmaceuticals—please ask for details*

R. P. SCHERER, Ltd., 216-222 BATH ROAD, SLOUGH, BUCKS. 'Phone: SLOUGH 21241

**WHAT DIFFERENCE HAS TV MADE  
TO THE AGENCY BUSINESS?**

Three years ago, most leading agencies accepted the challenge of television—which entailed learning a new business, engaging new staff, and installing costly equipment—because they welcomed its tremendous sales potential.

Their foresight was correct. The opening of ITV meant more than just the birth of another medium—it meant changes affecting not only advertising agencies and advertisers, but the whole pattern of marketing in this country.

Now, hundreds of advertisers working through almost every agency regard the immense impact of television as an essential and integral part of their campaigns.

Marketing methods, too, have kept in step. The old geographical sales areas are being widely discarded in favour of ITV areas, where effective concentration can be achieved by using television. A great deal of reorganization; but well worth it for the enormous new potential of TV advertising.

ITV—already established on most good media schedules—will go on developing; ATV will play a leading part in ensuring that it becomes an increasingly powerful and effective medium.

The lessons learnt since September 1955 are an important part of the changing face of advertising.

## The changing face of advertising



**Associated TeleVision Limited**

Programme company for the weekend in London and weekdays in the Midlands

**London:** Television House, Kingsway,  
W.C.2 CHAncery 4488

**Midlands:** Herbert House, 71 Cornwall  
Street, Birmingham 3 Central 5191



He thrives on

# FAREX

STILL 10 oz. STILL 1/4

This showcard is one of the most successful we have produced. In that wondering smile, those clear blue eyes, mothers see the health they want in their own young "handfuls". For extra "pull" with your housewives place it prominently on your counter and see its effect on heartstrings—and purse strings! Ask for one with your next order.



## 3-CEREAL FOOD

FORTIFIED WITH MINERALS AND VITAMINS

RETAIL PRICE 1/4 each. TRADE PRICE 12/10 per doz. PARCEL RATE 2 doz. x 10 oz. cartons 24/-.

*Made with all the experience of Glaxo Laboratories*



GLAXO LABORATORIES LTD., GREENFORD, MIDDLESEX BYRON 3434



Φ.T.S.

First in the field once again, with improvements in surgical stockings, Lastonet now introduce *light-resistant rubber* into their elastic net.

Because this largely prevents the deterioration caused to rubber by exposure to light, it enhances the efficiency and lengthens the life of Lastonet Elastic New Stockings.

With this added advantage, Lastonet Stockings will be even more widely prescribed on the NHS, and your profits must be increased.

No stock problems with Lastonet Stockings! No risk. Every stocking is individually made to the patient's measure. Quick delivery and an excellent profit margin are assured.

**Lastonet**  
ELASTIC  
NET STOCKINGS

Nylon or Cotton Send today for  
stocking measurement forms  
and display material.

LASTONET PRODUCTS LTD, CARN BREA, REDRUTH, CORNWALL

## **dr. Inverni & Della Beffa s.p.a.**

*Manufacturers of Drug Extracts and Fine Chemicals*



ACONITINE  
ASPARAGINE, NATURAL, MONOHYDRATE  
ASPARAGINE, NATURAL, ANHYDROUS  
COLCHICINE  
GLYCRRHETINIC ACID  
MALE FERN EXTRACT  
RAUWOLFIA ALKALOIDS  
SPARTEINE SULPHATE  
SQUILL GLYCOSIDES  
VERATRUM ALKALOIDS

PRICES AND SAMPLES  
ON REQUEST

**Milan - Italy - 99 Via Ripamonti**

Telegrams: INVERBEFF — MILAN

Telephone: 56-31-07/8/9

**This  
is the Pack for  
YOUR dispensary**



**Supplies obtainable  
from your usual  
Wholesaler**

Sample box gladly sent upon request from

**RICHARD DANIEL & SON, LTD.**

Mansfield Rd., Derby. Tel. 40671 (10 lines) and at  
Grosvenor St., Ashton-u-Lyne. Tel. 5161 (9 lines)



**NUCTA  
CREAM SHAMPOO**  
(WITH LANOLIN)

**NUCTA  
EGG AND LEMON  
SHAMPOO**

NOW IN THE POPULAR  
PLASTIC TUB  
TO SELL AT

1/-

Sufficient for two or three  
shampoos

TRADE PRICE 6/8 DOZEN  
FROM YOUR WHOLESALER OR  
DIRECT FROM

**STEWART, GOODALL & DUNLOP LTD.**  
121A PRINCES STREET · EDINBURGH



PRESSWORK, TINS, CANISTERS  
DECORATED METAL BOXES  
CONTAINERS OF ALL KINDS  
DRUMS AND KEGS



MODERN PACKAGES  
LIMITED

PHOENIX WORKS

UXBRIDGE 8535-6-7-8

## BIGGER SALES THAN EVER-

THIS SEASON FOR

'Thermega'<sup>Regd</sup>

ELECTRIC BLANKETS & PADS

### THERMEGA QUALITY

in materials, design and workmanship — has no equal. There's 30 years' experience behind the Thermega product, and Thermega craftsmen can all claim years of specialisation in their jobs.

### THERMEGA REPUTATION

voiced everywhere by thousands of satisfied Thermega users — and echoed by the medical profession.

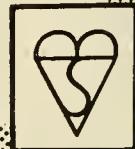
### THERMEGA RELIABILITY

evidenced in every Blanket — and by the B.S.I. Kitemark borne on each one!

### THERMEGA ADVERTISING

just as the cold weather and gift season begins, the Thermega Story will be told in the following national papers

DAILY EXPRESS	MANCHESTER GUARDIAN
DAILY MAIL	SUNDAY EXPRESS
DAILY TELEGRAPH	SUNDAY TIMES
NEWS CHRONICLE	SUNDAY GRAPHIC
SCOTSMAN	
PUNCH	



BE READY!

STOCK & RECOMMEND

'Thermega'

THE FIRST IN THE FIELD

• THERMEGA LTD •

37 THURLOE STREET, LONDON, S.W.1. KNIGHTSBRIDGE 8532

# A NEW MARKET IN HAIR COLOURING!

Thousands of Women with

## GREYING HAIR...



are turning to **Brown-Glo**

. . . the new harmless semi-permanent colouring  
that restores completely natural colour to greying hair

At last, women with unwanted  
greying hair can buy a hair  
colouring that will conceal their  
grey hairs absolutely naturally

### PROFIT MARGIN-OVER 51%

Trade price 29/9 per doz. plus 60% tax  
Retails at 5/3 per tube

Brown-Glo is available in six natural shades:  
DARK BROWN · DARK WARM BROWN · MID BROWN  
MID WARM BROWN · LIGHT BROWN · LIGHT GOLDEN BROWN  
Recommend the shade nearest to your customer's natural hair colour.

**Powerful advertising directed at the 12 million women  
with greying hair will create a big demand for BROWN-GLO**

Users will go on buying  
**Brown-Glo every 4-5 weeks**  
Order from your wholesaler now!

*A creation of*



L'ORÉAL · PARIS

**Brown-Glo**  
(Sister Product of Color-Glo)  
**SEMI-PERMANENT COLOURING**

Colours Greying Hair  
to a natural shade of Brown



GOLDEN LTD. · 7 GROSVENOR STREET · LONDON W.1. · HYDE PARK 1671  
Republic of Ireland enquiries to: Lilmar Pharmaceuticals, Ltd., Santry, Dublin.



To STOCKROOM

BIG TV advertising is  
making this Thermos 14QH  
model our best seller

Get some more on order FAST!



By Appointment to  
H.M. The Queen  
Manufacturers of  
Vacuum Vessels

**THERMOS**

REGISTERED TRADE MARK

THE RELIABLE BRAND OF VACUUM VESSELS

THERMOS LIMITED • SEYMOUR ROAD • LEYTON • LONDON • E10  
Tel: LEYtonstone 4061-4

Ever more popular Family  
Size 14QH (36 fl. oz.) fitted with  
convenient handle to make  
pouring simpler, more spill-proof  
than ever. Non-drip polythene  
pouring lip. Twin cups.

## Detensyl

Vegeto-Polyhormonic Hypotensor

The recognised treatment in conditions  
requiring the lowering of arterial tension

DETENSYL is another of the M.B.L. preparations which has been accepted by doctors in many countries. In various indications associated with blood pressure, regular administration restores normality. A small, periodic dosage is recommended for maintenance.

DETENSYL contains mistletoe, liver, pancreas and lung substances. More than a palliative, it re-educates the endocrine glands, allowing them to resume their regulation of the arterial tension.



### INDICATIONS

Conditions frequently associated with blood pressure, such as Menopausal Disturbances, Arteriosclerosis, Sclerosis of the Kidneys, Persistent Cephalgia, Arthritis and Auditory and Ocular Troubles, respond to DETENSYL therapy and almost inevitably disappear with the lowering of arterial tension.

MEDICO-BIOLOGICAL  
LABORATORIES LTD.

CARGREEN ROAD, SOUTH NORWOOD, LONDON S.E.25

# Domestos

*ON TV!*

## 169 Spots

*Every Station—Midlands, Northern, Scotland and Wales (June—July) and London (Sept.—Oct.).*

Three sparkling new films will once again drive home the DOMESTOS message—"Use DOMESTOS — the Brushless Lavatory Cleanser—last thing every night".



Supported by a

### Massive Press Campaign

Half-pages in *Woman*. Frequent insertions of large spaces in London Evening Newspapers and 49 large-circulation Provincial Evenings a combined readership of approximately

**40,250,000**

for every insertion

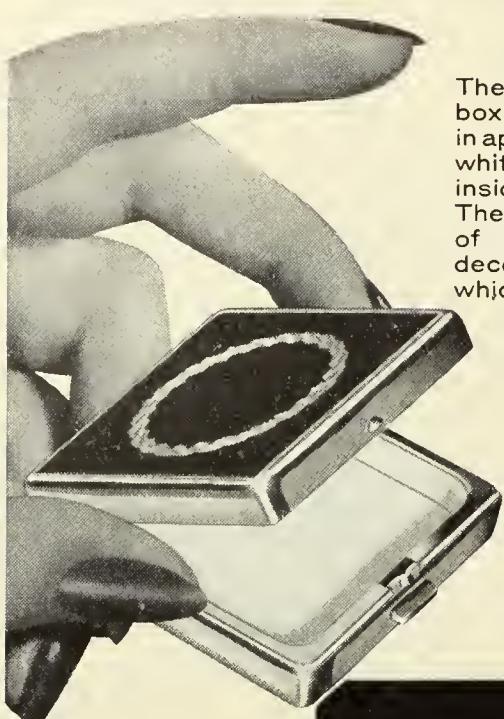
Increase your stocks  
and display Domestos

*NOW!*

TV means business—much increased business—to every retailer who ties up with point of sale display.

- Showcards readily available. ●



*Something New and Practical:*

The VOGUE tablet box is attractive in appearance and white enamelled inside. There is a choice of six colourful decorations from which to choose.

Packed in cartons of six.

Retailing at 10/- ea

VOGUE VANITIES LTD  
BIRMINGHAM 19  
Manufacturers of quality compacts



Beardmore

The house for

# BOTANICALS

SPICES · GUMS · ESSENTIAL OILS  
WAXES

*Ask for our List*

**BROME & SCHIMMER LTD.**

WHOLESALE DRUGGISTS  
BOTANICAL DRUG IMPORTERS & SPICE MERCHANTS  
DRUG AND SPICE MILLERS

7, LEATHER MARKET  
LONDON · S.E.1

HOP. 0825



YOUNG FOLKS' SHAMPOO  
(a 40 year old product)

In a NEW pack which  
**SELLS ON SIGHT**

Packed in cyc-catching counter-display cartons each containing 3 dozen sachets in assorted colours. Order a stock now on our guaranteed Sale or Return terms and be sure of quick sales to bring you higher than average profit.

Retail 7d. sachet—48/- gross plus P.T.

Retail 2/7d economy bottle pack—18/- doz. plus P.T.

From your usual wholesaler or

Overseas enquiries to

VINE'S BIOCRIN LTD.

GORDON & GOTCH LTD.

222/224 Harrow Road,

(Export Division)

London, W.2.

75/79 Farringdon Street,

Tel.: CUNningham 1172/3

London, E.C.4.

BOTANICALS  
CHEMICALS  
GUMS

JKL

ESSENTIAL OILS  
SPICES  
WAXES

NEW YORK

IPECAC  
COCHINEAL  
STRYCHNINE  
BRUCINE

HAMBURG

**JOHN KELLYS (LONDON) LTD.**  
24 OLD BROAD STREET, E.C.2.

Telephone: LONDON Wall 6585 (4 lines)  
Telegrams: "Ergotine, Stock, London"

**Delicious  
Multi-Vitamin  
supplement  
for all ages**

Vitavel Syrup is readily accepted by patients of all ages. This liquid vitamin supplement is delicious—a careful blend of true orange juice and liquid glucose with vitamins A, B<sub>1</sub>, C and D.

*One fluid ounce contains  
at time of manufacture:—*

VITAMIN A 20,000 i.u.  
VITAMIN B<sub>1</sub> 4 mg.  
VITAMIN D 3,000 i.u.  
VITAMIN C 80 mg.  
LIQUID GLUCOSE B.P. 25% W/V

# **Vitavel Syrup**

Packs	Retail	Chemists
6 fl. ozs.	3/9	2/6
40 fl. ozs.	24/-	16/-

**BEMAX** stabilized wheat germ is the richest known natural vitamin-protein-mineral supplement. It offers easily digested nutritional support for patients of all ages.

**PREGNAVITE** during pregnancy. A comprehensive vitamin-mineral supplement.

Packs	Retail	Chemists
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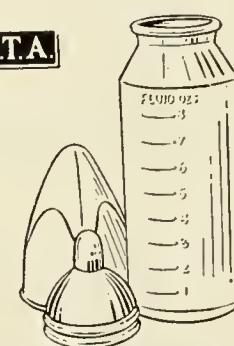


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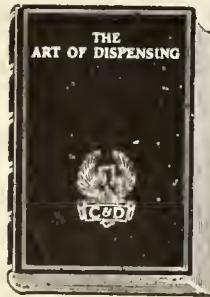
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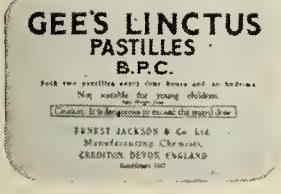
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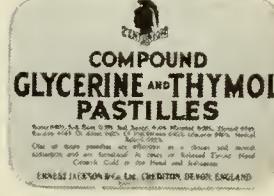
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Assistant-in-Dispensing

required. Whitley salary scale, with London Weighting; new well-equipped department. Hospital convenient to Northern Line (High Barnet) Station. Apply to Hospital Secretary, with details of experience and qualifications, and names of two referees. C 429

#### **BETHNAL GREEN HOSPITAL, CAMBRIDGE HEATH ROAD, LONDON, E.2**

Locum Pharmacist

Salary up to 16 guineas a week. Apply to Hospital Secretary. Tel.: ADV. 3413. C 397

#### **CANTERBURY GROUP HOSPITAL MANAGEMENT COMMITTEE**

Locum Pharmacist

required for service in the Group Pharmaceutical Department situated at the Kent and Canterbury Hospital. Salary by arrangement and according to experience. Enquiries to Group Pharmacist (telephone: Canterbury 2291). Applications to Group Secretary, Central Office, Nunney Fields Hospital, Canterbury. C 8432

#### **BROOKWOOD HOSPITAL, KNAPHILL, WOKING**

Assistant-in-Dispensing

Applications are invited for the above post. The successful candidate will be required to work under the supervision of the Chief Pharmacist, who is responsible for the preparation and issue of drugs and dressings for about 1,750 patients.

Salary scale £170 p.a. at age 16 years rising to £375 at age 22 years or over rising to a maximum of £490 p.a. (plus £20 p.a. for an approved qualification).

Professional and Technical Council B of Whitley Council conditions apply to the appointment which is subject to the provision of the National Health Service Superannuation Regulations.

The successful candidate will be required to pass a medical examination.

Accommodation available for female candidate for which a charge of £2 8s. per week will be made.

Applications giving particulars of age, experience and qualifications, together with names of two referees to the Physician Superintendent, C 417

#### **CENTRAL GROUP HOSPITAL MANAGEMENT COMMITTEE**

Senior Pharmacist and Pharmacist required at Bethnal Green Hospital (350 Acute beds). The department has recently been modernised and is approved for training students. N.H.S. Scale within the range £680-£870 for Senior Pharmacist and £600-£815 for Pharmacist, plus appropriate higher qualification allowance. Apply with details of age, training and experience to the Group Secretary, 213 Kingsland Road, London, E.2. C 344

#### **CITY GENERAL HOSPITAL, SHEFFIELD, 5**

Senior Pharmacist (M.P.S.)

Applications are invited for the above appointment.

Salary scale £650 x £30 (6)—£830 per annum. (Additional £25 p.a. if holding higher qualifications.)

Apply giving full details of age, qualifications, experience, etc., and the names of two persons for reference to the Group Secretary, Sheffield No. 1 Hospital Management Committee, Nether Edge Hospital, Sheffield, 11. C 8429

#### **ST. MARK'S HOSPITAL, CITY ROAD, LONDON, E.C.1**

Locum Pharmacist

required for indefinite period commencing immediately. Salary £16 16s. per week. Write or telephone to Secretary (Cle. 8821). C 8453

#### **184 STRAND, W.C.2**

Tel: TEMple Bar 9212/3 & 6340

#### **CHINGFORD HOSPITAL, E.4, and THORPE COOMBE MATERNITY HOSPITAL, WALTHAMSTOW, E.17**

Assistant-in-Dispensing

required. Whitley Council terms and conditions. Applications with copies of two recent testimonials to Secretary, Forest Group H.M.C., Langthorne Road, E.11. C 8428

#### **FOUNTAIN HOSPITAL, TOOTING GROVE, S.W.17**

Pharmacist

required in modern, well-equipped department which participates in clinical research concerning mental deficiency. Salary scale £580 to £785 p.a. for a 39-hour week, plus London Weighting. Applications, stating details of qualifications, experience and names of two referees, to Group Secretary. C 8389

#### **GENERAL HOSPITAL, MARGATE**

Locum Pharmacist

required. Applications, stating age, qualifications and experience, with names of two referees, to the Hospital Secretary. C 414

#### **HAREFIELD HOSPITAL, HAREFIELD, MIDDLESEX**

Assistant-in-Dispensing

required. Salary and conditions of service in accordance with Whitley Council recommendations plus London Weighting and with additional £20 p.a. if holding approved qualification. Applications, giving age, qualifications and experience, together with two testimonials to Group Secretary, Harefield & Northwood Group H.M.C., Mount Vernon Hospital, Northwood, Middlesex, by October 17, 1958. C 8446

#### **HOSPITALS FOR DISEASES OF THE CHEST, LONDON CHEST HOSPITAL**

Assistant-in-Dispensing

required for Hospital's Country Branch at Arlesley, near Letchworth. Resident or non-resident, Apothecaries' Hall or equivalent qualification. Whitley Council salary and conditions of service.

Applications, giving date of birth, qualifications and previous experience, should be sent at once to the House Governor, London Chest Hospital, London, E.2. C 8444

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**Appointments—Continued****KING EDWARD VII HOSPITAL,  
WINDSOR  
(Category III Hospital)**

Pharmacist

required immediately. Whitley salary. Applications with details of service and names of three referees to Secretary. C 8440

**LAMBETH HOSPITAL,  
BROOK DRIVE, S.E.11**

Assistant-in-Dispensing

required. Whitley Council rates of pay and conditions. Applications in writing, giving names of two referees to the Secretary. C 390

**METROPOLITAN HOSPITAL,  
KINGSLAND ROAD,  
LONDON, E.8**

Senior Pharmacist

for modern department. Permanent post vacant due to retirement. Salary £680 to £870 p.a. plus appropriate higher qualification allowance. Apply with details of age, training and experience to the Hospital Secretary. C 398

**NOTTINGHAM No. 1 HOSPITAL  
MANAGEMENT COMMITTEE,  
STERILE PRODUCTS UNIT,  
GENERAL HOSPITAL,  
NOTTINGHAM**

Senior Pharmacist

Applications are invited for the appointment of Senior Pharmacist to take charge of, and develop, the new Sterile Products Unit, to be completed during the next six months, at the General Hospital, Nottingham.

Detailed information may be obtained from the Chief Pharmacist.

Applications stating age, qualifications and experience, particularly in the preparation of sterile products, to be sent to the Group Secretary, General Hospital, Nottingham.

C 426

**NORTH STAFFORDSHIRE  
ROYAL INFIRMARY**

Deputy Chief Pharmacist

A vacancy exists for the above post. Salary within scale £675 to £910 per annum. Applications with names of two referees to the Hospital Secretary, Royal Infirmary, Stoke-on-Trent, as soon as possible. C 8417

**NORTH-WEST DURHAM  
HOSPITAL MANAGEMENT  
COMMITTEE,  
SHOTLEY BRIDGE GENERAL  
HOSPITAL,  
SHOTLEY BRIDGE,  
CONSETT, Co. DURHAM**

Pharmacist

Applications are invited from registered pharmacists for the above appointment. Department equipped with facilities for manufacturing and sterile work. Salary £580 by annual increments to £785. Whitley Council conditions. Applications, giving details of age, qualifications and experience together with names of two referees, to the Group Secretary, Shotley Bridge General Hospital, Shotley Bridge, Co. Durham, immediately. C 8443

**NOTTINGHAM No. 1 HOSPITAL  
MANAGEMENT COMMITTEE,  
NOTTINGHAM EYE HOSPITAL**

Chief Pharmacist (Category II)

Applications are invited for the appointment of Chief Pharmacist (non-resident) at the above Hospital.

Salary and conditions of service in accordance with Whitley Council Regulations.

Applications giving full particulars together with the names of three referees to be sent as soon as possible to the Group Secretary, General Hospital, Nottingham. C 408

**ROYAL SEA BATHING  
HOSPITAL, MARGATE**

Chief Pharmacist (Category III)

Whitley Council salary scale—£785 to £1,070 per annum. The duties of the post include responsibilities for the pharmaceutical services at certain other hospitals and convalescent homes in the group. Applications, stating age, qualifications and experience, with names of two referees, to the Hospital Secretary. C 430

**ROYAL FREE HOSPITAL GROUP,  
ELIZABETH GARRETT  
ANDERSON HOSPITAL**

Chief Pharmacist (Category III)

Applications are invited from women pharmacists for the post of Chief Pharmacist at the above hospital. Salary in accordance with Whitley Council scale. Applications together with the names of two referees, should be addressed to the Group Chief Pharmacist, Royal Free Hospital, Gray's Inn Road, W.C.1. C 8422

**ST. HELIER HOSPITAL,  
CARSHALTON, SURREY**

(Category V—733 Beds)

Assistant-in-Dispensing

required for general dispensing duties in busy department. Experience of sterilising techniques an advantage. Canteen facilities available. London Weighting payable.

Applications, with names of two referees, to Secretary. C 8413

**SPRINGFIELD HOSPITAL,  
TOOTING, LONDON, S.W.17**

Assistant-in-Dispensing

required. Salary scale £395 p.a. at age 22 or over rising to a maximum of £520 p.a. (plus £20 p.a. for approved qualification). Applications giving particulars of age, experience, qualifications and names of two referees to Group Secretary as soon as possible. C 8445

**ST. HELIER HOSPITAL,  
CARSHALTON, SURREY**

(733 Beds)

Senior Pharmacist

Applications invited for above post. General acute hospital (Category V); well-equipped pharmaceutical department. The successful applicant will be responsible for the manufacture and issue of ward stocks within hospital and also for issues to the other nine hospitals in Group.

Salary (plus London Weighting) in accordance with Whitley Council Scale. Good canteen facilities. Apply, giving names of two referees, to the Secretary. C 8414

**SYDENHAM DISTRICT  
HOSPITAL,  
WALLACEBURG, ONTARIO,  
CANADA**

Pharmacist

Applications invited for above. Salary equivalent to one hundred pounds per month. Excellent working conditions. Please Cable Collect. J. S. Renton, Sydenham District Hospital. C 8448

**ST. LEONARD'S HOSPITAL,  
NUTTALL STREET,  
LONDON, N.1**

Senior Pharmacist

Permanent post in modern department. Salary £650 to £830, plus appropriate London Weighting and higher qualification allowance. Apply with details of age, training and experience to Hospital Secretary. C 400

**PUPILS****ST. HELIER HOSPITAL,  
CARSHALTON, SURREY**

(733 Beds)

Post-Graduate Student

required. Well-equipped department. Good canteen facilities. London Weighting payable. Apply, with names of two referees, to the Secretary. C 8412

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RETAIL HOME**

**BANSTEAD, SURREY.** Lady assistant required for counter and general duties. Skidmore, 30 High Street, Banstead, Surrey, Burgh Heath 720. (Evenings or Sundays, Burgh Heath 2024.) C 1763

**BAYSWATER.** Unqualified assistant, male or female, required for busy West End pharmacy. Write giving details of age, experience, etc. Box C 1761.

**BANSTEAD, SURREY.** Lady assistant required for senior position for cosmetic and general counter and display. Arden and other agencies held. Modern shop. Multiple training and knowledge photographs an advantage. Junior assistant, lady, also required. Skidmore, 30 High Street, Banstead. Phone: Burgh Heath 720 (evenings or Sunday, Burgh Heath 2024).

C 1751

**CAMBRIDGESHIRE.** Pharmacist required to manager our March Branch. Present salary £1,100 per annum inclusive. An attractive house in pleasant surroundings is available at a reasonable rent. This permanent progressive post in a busy pharmacy offers considerable scope and is superannuated. Apply to Peterborough Co-operative Chemists, Ltd., Park Road, Peterborough. C 1753

**MAIDA VALE:** Unqualified assistant required for counter and stock control. No rota, half-day or Sunday duties. Very good and helpful staff. Written applications please to R. H. Parker, 35 Clifton Road, London, W.9. C 1752

**LOCUMS WANTED**

**BAYSWATER.** Qualified locum required for busy West End business. Dates required, any time during the next six weeks. Salary by arrangement. Please reply giving full details of age, experience, etc., and when available. Box C 1760.

**WHOLESALE**

**AN EXCELLENT opportunity exists in factory in N. London for a young pharmacist wishing to enter the manufacturing field. Because of the great variety of both pharmaceutical and toilet goods produced the vacancy offers very great opportunities to keen energetic applicant. Five-day week. Non-contributory pension scheme in operation. Apply giving details of age, qualifications, etc., to Box C 8451.**

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invite applications from

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Personnel Manager (Ref. RES),  
**THE BRITISH DRUG HOUSES  
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Graham Street, London, N.1.

C 8343

**ALLIED LABORATORIES, LIMITED****Medical Representatives**

Applications are invited for the following territories:

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Hampshire

Previous experience in representation work is desirable but consideration given to men with sound pharmaceutical and medical background. Applicants should hold current driving licence and reside on the territory applied for. Remuneration by salary, bonus and expenses. Life assurance and pension scheme in operation and car provided. Apply, in confidence, giving full details, to Sales Manager, Allied Laboratories, Ltd., 140 Park Lane, W.1. C 421

**Representative for the West Country**

A leading Pharmaceutical Company marketing advertised pharmaceutical and toilet products requires a representative, resident on the territory which comprises Cornwall, Devon, Dorset, Somerset, Gloucester and Wilts, to maintain and develop an established connection in the pharmaceutical field. Remuneration by salary, expenses and bonus. Company car provided. Previous experience as representative not vital, but enthusiasm and a good knowledge of retail pharmacy trading necessary. Full particulars of experience, salary required, and age to Box C 8438.

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**ALLEN & HANBURY'S, LTD.**, Bethnal Green, London, E.2, require a pharmacist to act as representative in the North Riding and part of the West Riding of Yorkshire. Applications are invited from men of sound character with initiative and drive. A period of training will be given. The salary will be commensurate with qualifications and experience and a contributory pension scheme is in operation. Expenses are paid and a car supplied. Full details of age, qualifications and experience should be sent to the Personnel Manager. C 8450

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As a result of promotion and further expansion, vacancies occur for medical representatives in all parts of the United Kingdom.

The products to be detailed to the medical profession are the pharmaceutical specialities of C. H. Boehringer Sohn, which are marketed in the United Kingdom by Pfizer Ltd.

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Applications stating full details of age, career to date and territory preference should be sent in confidence to:—

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Pfizer Ltd.,

137/139 Sandgate Road,  
Folkestone, Kent,  
quoting M.N.G. 6713.

C 8455

**LEDERLE LABORATORIES DIVISION  
CYANAMID OF GREAT BRITAIN  
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require a

**MEDICAL REPRESENTATIVE**

For the London area. Applicants, age 25-35, should have a pharmaceutical background, and selling experience would be an asset. Remuneration is by salary, with Prize scheme, expenses, company car, Pension scheme. Fully-detailed applications, which will be acknowledged, should be addressed, in complete confidence, to Personnel Manager, Cyanamid of Great Britain, Ltd., Bush House, London, W.C.2. C 8454

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**GENATOSAN, LIMITED**, a member of the Fison Group, has vacancies for Medical Representatives for territories in London, the Home Counties, East Anglia, N.W. and S.W. England, and Scotland. Applications are welcome from Pharmacists and men with a good pharmaceutical background. Previous experience of this work is an asset but is not absolutely necessary, as a very comprehensive training is given. Each applicant should, however, possess a keen desire to succeed in this special type of selling. Interested persons who reside in these areas or could move there if appointed should write for further details to the Personnel Officer, Genatosan, Limited, 12 Derby Road, Loughborough, quoting reference No. 47, with a summary of their education and career to date, also a stated preference for territory. This latter information will be treated in strict confidence. C 8447

**MANUFACTURERS** of surgical dressings require a number of first-class representatives in the retail division of the Company. This Company has achieved a considerable reputation in respect of the dressings at present being sold direct to the Industrial User and to Hospitals, Local Authorities, etc. It now intends to make these dressings available to the public. This is an excellent opportunity for a good man to join a go-ahead Company marketing products unequalled in this field. Connections with the chemist trade essential. Car owner required. Representatives will be required for the following areas:

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Birmingham  
Bristol  
London  
Southampton

Reply with full particulars which will be treated in strict confidence to:

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Messrs. Wallace, Cameron & Co., Ltd.,  
83 West Regent Street,  
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C 8441

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**Australian Pharmaceutical Company (Sigma Company Limited, Melbourne)** requires working foreman for Tablet Department.

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C 8399

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C 8449

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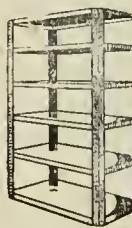
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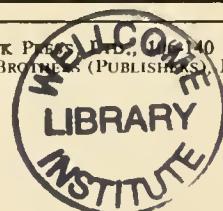
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